

I must now draw my remarks to a close, and in doing so, I would say that the combinations of the acid with iron and quinine have proved very successful in treating pyrexia. The latter, introduced to the notice of the profession by Dr Graham Brown,¹ is, according to some, the most powerful antipyretic extant.

ARTICLE IV.—*Antiseptic Treatment of Chronic Bursitis.* By ROBERT ROXBURGH, M.B., etc., late Resident Surgeon, Clinical Wards, Royal Infirmary, Edinburgh.

THE following cases, which occurred in the practice of Mr Chiene, while he lately had charge of the Clinical Surgical Wards of the Edinburgh Infirmary, illustrate the great advantage of catgut as the means of drainage in certain antiseptic wounds.

I.—J. R., a miner, æt. 18, was admitted, 10th Sept. 1877, with an enlargement of the bursa patellæ, associated with pain, particularly on movement. No distinct history was forthcoming, but he had only suffered pain and inconvenience for a week. The skin having been purified with strong carbolic lotion, a small incision was made with a tenotomy knife into the bursa under the spray, and about half an ounce of sero-sanguineous fluid was squeezed out. A few threads of fine carbolized catgut were then introduced with sinus forceps, and the usual gauze dressing was applied, the limb being bandaged to a posterior splint. The dressing was left untouched for ten days, during which the patient never complained of pain, and on its removal on the tenth day the bursal swelling was found to have entirely disappeared, the tiny wound was completely cicatrized, and the portion of the catgut skim outside the wound was lying on the skin just as it had been left, but cut off by the cicatrix at its point of exit, so that it could be rubbed away with the finger. The patient returned home cured.

II.—L. F., a pawnbroker's assistant, æt. 16, was admitted 13th Sept. 1877 with chronic bursitis of the knee, which she declared she had only noticed a fortnight previously, and which during that time had been causing her considerable pain. She could assign no cause for the swelling.

The treatment was identical with that in the former case. The fluid was straw-coloured, and amounted to a few drachms. The dressing was allowed to remain for ten days, when on its removal the swelling was found to be gone, the wound healed, and the remains of the catgut drain lying loosely on the skin.

In both cases the discharge on the dressing consisted merely of a serous stain, without a trace of pus.

These cases are examples of an important surgical principle. The object aimed at was not obliteration of the sac, but simply

¹ *Edinburgh Medical Journal*, November 1876.

and solely relief of tension within it. The epithelial cells lining the bursæ had acquired the habit of over-secretion—a habit set up in the first instance by injury from without, but now perpetuated by the mechanical irritation of distension. As in other analogous cases, a temporary abandonment of the habit was all that was necessary to insure a return of the cells to their normal condition. This was accomplished with the least possible disturbance of the parts, and with almost no pain to the patient, while the drain, being of an absorbable material, permitted a free exit for discharge, but did not stand in the way of healing.

It may be claimed for this method of treatment that it is more certain and more rapid than counter-irritation, and much less painful than free incision, or injection with iodine; while in simplicity, a feature rarely attributed to antiseptic surgery, it could hardly be surpassed. One dressing only was used, and the spray was required but once; for although it was used as a precautionary measure during the removal of the dressing, experience would probably warrant us in guaranteeing that in non-suppurative chronic cases, such as these, healing would be complete in the ten days allowed. It is scarcely necessary to note that an essential of success is the careful exclusion of fermentative mischief from without. Had putrefaction occurred, suppuration would in all probability have followed; the catgut would have been insufficient to drain away the dense viscid pus; accumulation within the sac would have taken place, necessitating free incision; and so the cure would have been rendered comparatively tedious and painful.

ARTICLE V.—*Ueber eine neue Methode zur Vervollständigung des Unterrichtes in der Gynäkologie.* Vortrag, gehalten in München am 15. September 1877, von F. WINCKEL, Dresden. Mit VI. Tafeln.

ON the 15th of September last, previously to the annual meeting of German physicians and naturalists, a number of the leading gynecologists of Germany met together to form a German Gynecological Congress. We look with high expectations for the production of much valuable material from the new society. The titles of the papers read at their first meetings awaken our interest, and we have been favoured with an early copy of one of the contributions, which many of our readers will thank us for bringing under their notice; for, apart from its own merits, the author has long been known as one of the soundest and most practical of Continental workers in this department of medicine.

The contribution comprises letterpress giving an account of a new method of mounting and preserving naked-eye pathological specimens, and is accompanied by six photographic plates of speci-