

extensively disorganized, and where little was hoped for from the operation—and suppuration of the cornea took place in one eye without obvious cause. The other eye of the same patient was successfully operated on.

Iridectomy in eight cases. In four it was done for the formation of an artificial pupil where the normal aperture had been closed by disease—in all of these with excellent results. In two cases of closed pupil resulting from syphilitic iritis, and in two of chronic glaucoma, the operation afforded great relief from pain, and gave rise to no inconvenience; but the condition of the retina was such that only slight improvement to vision followed its execution.

Excision of Staphyloma was done once. The patient had a most unsightly enlargement of the anterior portion of the globe, which was not merely a deformity, but, from being subject to inflammation, constituted a great annoyance. Four curved needles, armed with sutures, were passed through the cornea, from above downwards, just in front of the iris, and the whole central portion of the cornea having then been excised, the needles were drawn through and the sutures tied. No inflammation followed, and the eyeball was reduced to slightly less than its natural size, so as to allow the wearing of an artificial eye.

A SINGULAR CASE OF DEATH BY SUFFOCATION.

[Communicated for the Boston Medical and Surgical Journal.]

A CHILD, previously healthy, except a slight cough, aged five years, while playing about house suddenly coughed, when respiration seemed totally obstructed and the child died instantly.

A few hours after death I attended a *post-mortem* examination with Drs. Huse and Hamilton.

On opening the thorax, the lungs were found inflated and perfectly healthy; some slight adhesions existed between the pulmonary and costal pleuræ of the right side, which were easily broken by the finger.

The trachea was next opened by a longitudinal incision, when the larynx and glottis were found filled with a soft solid substance which took the shape of the larynx and entered the glottis like a wedge, nearly or quite a half inch in length, and evidently driven up by the force of the cough. The incision was next extended downwards, and at the bifurcation of the trachea a similar piece of the same substance was found filling the trachea and extending a little into the right bronchus, as large as a large bean.

Just below the bifurcation was a rounded mass of the same substance, enclosed by a sac or walls like an abscess, the walls in contact with both bronchi and communicating with the right by a small ulcerated opening. A sinus extended upwards and to the right,

posterior to the right bronchus, nearly two inches, terminating in a blind extremity. This sinus was perhaps as large as the bronchial tube behind which it extended, but irregular, dilated into lateral pouches. The main body of this substance was about the size of a large nutmeg. It was, in the different places, alike in color and consistence, resembling in both a piece of *soft* cheese, yellowish-white in color. It was friable, yet with a little elasticity—easily pressed into any shape with the finger or knife.

About one year ago this child had measles, accompanied by some pneumonic inflammation, but soon recovered and has been well, sprightly and active since, but, as the parents say, "she has had a cough ever since, and for the last two weeks has occasionally coughed up small pieces of this same cheesy matter." No scrofula exists in the family; the parents and the other children are healthy.

This was probably an abscess, chronic in its course, which lost its fluidity before it found exit. Most respectfully yours,
East Berkshire, Vt., March 31st, 1865. O. F. FASSETT.

Reports of Medical Societies.

EXTRACTS FROM THE RECORDS OF THE BOSTON SOCIETY FOR MEDICAL IMPROVEMENT. BY FRANCIS MINOT, M.D., SECRETARY.

FEB. 27th.—*Puerperal Mania*.—Dr. J. P. REYNOLDS reported the following case.

Mrs. F., a woman of delicate organization, 28 years old, was confined on the 2d of September for the third time. The labor was easy and natural. Five days earlier, Mrs. F. had a severe fall from a chair on which she had been standing, coming down astride the chair, and receiving the force of the blow on the lower part of the uterine tumor. The nervous shock of this accident was severe, but without known after effects. In the week following her confinement various minor difficulties occurred; at first she required for two days the catheter, then for one or two days she could not retain her urine. This was followed by persistent annoying pain in the uterine region. The lochia disappeared on the third day; the secretion of milk was then normal. She slept very little at night. At the close of the seventh day she had a severe paroxysm of hysteria. From this, however, she recovered without active treatment. On the ninth day there supervened a maniacal attack of considerable severity, characterized by delusions, the patient seeing devils spitting fire at her, people running about the room, &c., violent headache, jactitation, frequent attempts being made to spring out of bed, and commencing convulsive movements of the muscles of the face. For many days subsequently she continued in a highly disturbed state of mind, and with very little memory. Under a highly supporting diet, and the constant administration of ether, she slowly recovered. The ether was at first given to avert an apparently impending convulsion, Dr. Reynolds believing that this would have inevitably occurred but for the fact that ether was