## Punctured Wound from a Rake-Handle.

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on the surface of the malformed bladder. The supra-renal capsules were both present, but of small size.

The small intestine was about eighteen inches in length, and extended from the stomach to a point in the lower part of the parietes, where it was firmly attached, and terminated in a cul de sac. No large intestine.

There were two well-formed testicles. Nothing but cellular tissue behind the bladder.

Organs of the thorax normal.

## PASSAGE OF A RAKE-HANDLE THROUGH THE SCROTUM AND ABDOMINAL PARIETES TO THE RIGHT HYPOCHON-DRIUM. RECOVERY.

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On the 7th of May, 1860, J. B., aged 29 years, laborer, ascended a hay-mow for the purpose of removing some hay. On his return to the floor he attempted to slide down, and in so doing he slid upon a rake handle, which was accidentally left leaning against the The handle entered at the lower or inferior portion of the scrotum, a little to the left of the mesial line, passing up over the pubes, then running somewhat diagonally across the abdomen, made its exit in the right hypochondriac region, between the tenth and eleventh ribs. It required considerable force to extract the instrument from its unnatural, and, to the patient, unpleasant position. The left testicle was completely turned out of its place, and almost denuded of its covering. Hæmorrhage was slight. A probe was with some difficulty passed up over the pubes. testicle was carefully replaced, the wound cleansed of all clots of coagulated blood, and the edges brought together and retained by The simple water dressing was used, and a lotion composed of tincture of arnica and water was constantly applied along the track of the wound. Rest and the horizontal position were enjoined. On the 8th there was extensive ecchymosis, showing distinctly the course the instrument had taken. Bowels tym-Discharge from lower end of wound slight. Under appropriate treatment, the tympanitis yielded, and the wound began to unite by granulations. About a week subsequent, a messenger was sent to my office desiring my immediate attendance. my arrival at the house, I learned that he had had chills on that day and the day previous. At the time of the visit there was considerable fever. By examination, I discovered a tumor situated on the track of the wound, about midway from either extremity. It was well defined, and fluctuation was distinctly perceptible. at once opened it with a bistoury. It gave vent to a large quantity of pus, which continued to be discharged for a few days.

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The incision then healed in the ordinary manner. Recovery was rapid and complete.

## RESEARCHES UPON THE ERECTILE ORGANS OF THE FEMALE.

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Mammalia.—I shall take for an illustration of the arrangement of the muscular apparatus of the internal organs of generation of one of the monodelph mammalia, one of the ruminantia—the she-The body and the cornua of the uterus are lodged in the middle, and the tubes and ovaries in the lateral portions of a large membrane, which (abstractly considered as a fold of its surface) stretched in the pelvic cavity like a transverse partition, is fixed by its two anterior extremities to the superior dorsal walls of the abdomen; and by its two inferior and posterior extremities to the Although very thin and perfectly transparent ventral walls. throughout the great part of its length, this membrane, described by all anatomists as a simple conjunctival peritoneal web, presents, in many points, independently of the round ligaments, the muscular nature of which is well understood, folds and thickenings which, visible to the naked eye, exhibit an appearance very analogous to that of these ligaments; but in the most transparent portions, as well as in the locality of these folds, a microscopic examination everywhere shows smooth muscular fibres, in one place separating from each other and by their anastomosis forming networks, the meshes of which are more or less slack, while they are elsewhere crowded together and condensed into cords or muscular ribbons.

The middle part of this membrane is nothing else than the external layer of the muscular envelope of the uterus; in the median line we observe, throughout its whole depth, a decussation of muscular fibres from one side to the other. This decussation marks the junction of the two muscular systems, which ought to be studied at first separately and abstractly considered from their reciprocal penetration. Applying to this study the general data furnished by an examination of all the muscular systems which interlace (the abdominal muscles, that of the pharynx, the heart, &c. &c.), that all of their fibres in continuing their original direction traverse the median line more or less obliquely, and that in considering their direction with regard to the median line only, the ascending fibres on one side are in continuity with the descending fibres on the opposite, we clearly make out that the two kinds of fibres which we have observed in the broad ligament of birds, are represented, the upper by the lumbar ligament on one side, and the lower by the pubic ligament on the other side, and thus the whole portion of the muscular membrane intermediate to these two, fixed to the lateral portions of the sacrum, has become the muscular insertion of the great ligament and the utero-sacral ligaments on