

truded. It was returned without difficulty by the patient; but after a few minutes a plucking sensation began to be felt in the left iliac fossa, which gradually extended to the umbilical region, increasing in intensity till violent colic was experienced. The woman was obliged to lie on her back, immovable, and with the legs and thighs flexed; the temperature of the body was below the healthy average; pulse weak, and beating only from 45 to 50 per minute; the abdomen inflated; vomiting and various other symptoms were present, indicating the presence of a strangulated hernia. We may pass over the details of the treatment; it was unsuccessful and the patient died in less than two days.

On opening the body about two quarts of blood were found effused,—half into the cavity of the peritoneum, and half into that of the small intestine (*celle de l'intestin grêle!*). The stomach (duodenum) and upper part of the jejunum contained a small quantity of air; the lower fifth of the small intestine and the large intestine were entirely empty. "At the junction of the lower fifth with the rest of the small intestine, a mass of the ileum, eight inches in length, with a portion of mesentery, was found strangulated within a recent slit torn in the parietes of a herniary sac to be presently described. No perforation appeared in the intestine, nor was that portion of the mesentery engaged at all diseased.

The herniary sac, which extended from close to the uterus down to the crural arch, was attached at its extremity by firm bands to the thigh-joint (*racine de la cuisse*). It opened above by an oval orifice, capable of admitting the forefinger, a little more than an inch from the commencement at the uterus of the round ligament. It accompanied this ligament to near the internal inguinal ring, and then left it to pass under the crural arch, where it terminated in a cul-de-sac, capable of admitting a small egg. At a little distance from its orifice was a slit larger than the orifice itself, and opening from a supplementary sac (*laquelle termine un infundibulum, un appendice veritable*), a subdivision, as it would seem, of the sac which may thus be considered double. This appendix, or supplementary sac, was about one inch and a half in length by a like breadth, and free in the abdomen. Its form was conical, its larger end being appended to the principal sac. The parietes of both sacs were formed by the peritoneal fold forming the broad ligament of the uterus. It was in passing from the principal into the smaller sac, and across this through the newly-formed slit, that the mass of small intestine and mesentery had become constricted. The mesentery had become involved at a point so near to its attachments to the vertebral column that by the attempt to

straighten the body during life a considerable strain was exercised on the larger sac,—pulled thus in one direction by its attachment to the thigh-joint, and in another by those to the spinal column. The plucking sensations and pain had been accordingly felt by the patient especially on any attempt to straighten the thigh and leg of the affected side. The hernia had evidently become strangulated during the effort to pass the fæces above noticed, but though so short a period had elapsed between that occurrence and death, the parts involved had become so swollen that it was necessary to mutilate them to reduce the constriction.—*L'Experience*.

Sir Astley Cooper has recorded remarkable examples of both mesenteric and mesocolic hernia; but we are disposed to assent to the opinion of our French contemporaries that the above case, which they have named one of *hernia of the broad ligament*, is *sui generis*. It is obvious that in such a case surgical aid is of no avail,

WINE OF COLCHICUM IN FEVERS.

To the Editor of THE LANCET.

SIR,—I would beg to call the attention of the medical profession to the value of the *vinum colchici* in fevers generally.

I have used it for a considerable time in scarlatina, measles, small-pox, influenza, and every other form of fever, when there has been the slightest manifestation of an inflammatory action existing. In one case of confluent small-pox in an adult, who had been vaccinated, the most marked benefit was derived from its administration. I have also found it singularly useful in checking the evening exacerbations of febrile diseases, and in abbreviating the duration of the disease.

The only difficulty I have experienced has been its tendency to run off by the bowels, but after trying a variety of adjuncts I have proved that a minute quantity of the tinct. opii, modified by the addition of the same quantity of *vinum ipecacuanhæ*, has always retained the colchicum in the system, and, also, without at all increasing the febrile action by the presence of the opiate. Having for a lengthened period proved the advantage of the colchicum in such cases, I have wholly relinquished the saline method of treatment in fevers, and can with the greatest confidence recommend its employment to my medical brethren. I have the honour to be, Sir, yours obediently,

THOMAS EMBLING.

Brompton-row, May 18, 1843.