

Dr. Sambon, who has done so much to elucidate the pathology of the disease, contests the truth of the maize theory, and seems to incline to the view that it is caused by a fly of the *Simulidæ* order, but though Dr. Blandy notes that the larvæ and pupæ of this fly were found on the banks of a river about 700 yards away from the asylum, I don't think the causation has, as yet, been fully worked out.

I have no doubt that cases similar to mine have occurred during the summer in other Irish asylums, and I shall be very much obliged if any medical officer of an asylum who sees my paper will either let me know if he has had cases of a similar nature, or will publish the same at a future meeting.

A Case of Strangulated Inguinal Hernia in an Old Insane Woman, with Gangrene of the Bowel; Enterotomy; Recovery. By EDWARD GANE, M.D., Assistant Medical Superintendent, Sunderland Borough Asylum.

E. J. S—, æt. 77 years, was admitted to the Sunderland Borough Asylum labouring under melancholia of a rather confused type.

On the night of October 21st a swelling about the size of a hen's egg appeared in the left groin. The patient complained of pain, and vomited once a darkish-brown fluid. The swelling was tense, elastic, and obviously contained fluid. There was no impulse.

It was not known at the time whether the patient was subject to a rupture, and there was no indication of one on admission. Later, on inquiry from relatives, it was found that she had had a hernia for many years.

The signs of strangulation were not definite, and the patient could give no reliable account of her symptoms. On the third day, however, her condition was serious, vomiting began to be more frequent, and I decided to explore the swelling.

Under an anæsthetic I made an incision over the whole length of the inguinal canal, and exposed the sac, which had the appearance of dirty wet wash-leather. A clear fluid escaped. A knuckle of bowel, apparently gangrenous, appeared at the bottom of the sac. Except for its apex it was closely adherent to the sac.

Under these circumstances, and the condition of the patient being critical, I decided merely to incise the bowel and leave it *in situ*. This was done, a thin mucoid fluid escaping. A couple of stitches were inserted at the ends of the skin incision and a suitable dressing applied.

The patient vomited freely after the anæsthetic, and during the night collapsed, but rallied after administration of amyl nitrite and strychnine.

She was somewhat better in the morning, and was much relieved

towards evening by the passage of a small quantity of fæces by the wound.

Two days later an enema was given and subsequently the lower bowel began to act naturally, the amount of fæces escaping from the wound becoming less and less. This ceased a few days ago, and the wound is now almost healed without the presence of a fistula. The bowels act naturally, and the patient takes her food in a very satisfactory way. Her general health (and temper) are in fact much better than they were before the operation.

The case may be of interest as showing the complete way in which recovery may take place under unfavourable conditions.

With regard to the treatment, I must ask my surgical readers to be gently critical. Insane patients give one little help towards an accurate diagnosis, and their symptoms are very often anomalous, or, at any rate, usual symptoms are not seldom absent. Moreover, as in this case, the patients are often restless after an operation and difficult to control.

I publish this case, which has been previously reported in the *St. Bartholomew's Hospital Journal*, with the kind permission of Dr. Middlemass, Medical Superintendent.

Recent Medico-Legal Cases.

REPORTED BY DR. MERCIER.

[The Editors request that members will oblige by sending full newspaper reports of all cases of interest as published by the local press at the time of the assizes.]

REX *v.* CHETWYND.

A case in which considerable public interest centred came before Mr. Justice Scrutton, at the Derbyshire Assizes on Saturday, when George Rowland Chetwynd, æt. 25, engineer, was charged with the theft of a motor-car, of the value of £250, the property of Dr. T. A. Barron, at Spondon, on July 5th, 1912.

Mr. Drysdale Woodcock prosecuted, and Mr. Hugo Young, K.C., with Mr. H. Maddocks (instructed by Messrs. Moody & Woolley), defended.

Before defendant was called upon to plead, his Lordship inquired of the defending counsel: Is he fit to plead?

Mr. Hugo Young: Oh, yes.

His Lordship: I thought there was some doubt as to his sanity?

Mr. Hugo Young: No.