

*Appearances on Dissection.*

In the right ventricle of the heart, there was a mass of coagulable lymph, which extended into the neighbouring large vessels, very firm, and of a light yellow colour; it did not fill up the cavity completely. The apex of the left ventricle was dilated into a pouch, about the size of a large walnut. There was an aneurism at the arch of the aorta; the latter was enlarged beyond its usual size. The three semilunares were thickened and opaque. The coats of the pulmonary artery were elongated, and of a light reddish colour. The valvulæ mitrales were nearly obliterated. The lungs were full of tubercles, mostly in a state of suppuration. The liver was enlarged, and there were two calculi, very small, in the *ductus hepaticus*. The other viscera were perfectly found.

Your obliged

*Hatton Garden,*

CHARLES BROWN.

*May 10th, 1799.*

P. S. I am under the necessity of deferring my paper on the antivenereal virtues of the *hydrargyrum phosphoratum*, and my experiments with the *yellow oxyd of tungsten*, till I have leisure to complete both.

*Account of the Use of an Instrument for cutting the Cornea, in the Operation of extracting a Cataract.*

By A. CARLISLE, Surgeon to the Westminster Hospital.

A Few years ago, it fell in my way to see an instrument which had been used with success at Paris, and in other parts of the Continent of Europe, for making the incision of the cornea, in the operation of extraction. The great difficulty of finding the globe of the eye, and the consequent tediousness, as well as incertitude of performing the incision, induced me to try the instrument to be described.

Having previously decided in my own judgment, that depression is a less efficacious operation than extraction, provided the latter be performed with due attention and dexterity, and having found that nearly the whole of the success turned upon the incision of the cornea, the following case presently occurred:—A blind woman, having had one eye spoiled by an attempt at depression, and the other useless from a complete cataract, was pitched upon for the operation. The subject was a very indifferent one, being old, and afflicted with chronic inflammation of the eye-lids. The globe of the eye, however, during the operation, was tranquil; the incision was made satisfactorily, and, without any other assistance, the opaque crystalline lens jumped

out.

out. An undue degree of pressure occasioned the flow of a small quantity of the vitreous humour, nevertheless the patient recovered her perfect sight. Mr. LYNN, senior surgeon of the Westminster Hospital, has also employed the same instrument with perfect success as to the incision; but as the cases are both now under treatment, the result cannot be ascertained.

The form and particular mechanism of this instrument is not easily described in words; and an expensive plate would only gratify curiosity, without enabling the instrument-maker to form one with that accuracy which this nice operation requires. Mr. STODART, an eminent surgeon's instrument maker, in the Strand, has paid particular attention to this instrument, has seen it used, and made himself acquainted with all its needful qualifications; he has it for sale. It consists of a plate of brass, with a loop, or ring, of the size of the transparent cornea, fixed at a right angle with one end of the plate. The eye lids being held open, the cornea is made to project through this ring, so as to expose nearly the whole of its transparent part beyond its inner edge. A cutting blade of steel is made to slide close against the inner surface of this brass loop, which is acted upon by a strong steel spring. When cocked, the blade is carried beyond the right edge of the ring; and when let off by a trigger, it passes through the lower half of the cornea, cutting a flap of a semicircular form at its lower edge. The other part of the operation is then to be conducted as usual. An adjustable screw alters the distance of the cutting blade from the ring through which the cornea protrudes, so as in some measure to adapt the instrument to eyes of different diameters. The ring itself is also made removeable, so that one of the size required may be chosen.

If there is any objection to this mode of dividing the cornea, it rests with the circumstance of the sudden collapse of the globe of the eye, endangering the protrusion of the vitreous humour, before the muscles of the globe are sufficiently aware of the resistance taken from that body, or before they recover from the shock which this incision communicates to the whole organ. Still, however, taking into consideration the difficulty, and even sometimes total impossibility of making a good incision with the hand, I should conceive that the use of this instrument may be attended with beneficial consequences in this country,