Clinical and other Notes.

QUININE-URETHANE SOLUTION IN THE TREATMENT OF ANGIOMA.

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The treatment of naevi by the injection of sclerosing solutions is by no means a novel procedure. Reference to any of the older books on surgery shows this to have been practised before the discovery of electrolysis. Powerful coagulants of the blood were employed, such as iodine, pure carbolic, chloride of zinc and perchloride of iron. A considerable number of fatalities from embolism were recorded and the method rightly fell into disuse.

After the third injection.

Recently I was asked to treat a case of cavernous angioma of the lower lip in a boy aged 12. The tumour was so extensive that excision was, out of the question. Not only were two-thirds of the lip involved, but also the mucous surface of the cheek and the gum on the affected side. During cold weather, or when the boy became excited, the swelling assumed very large proportions, and so alarmed the patient and his parents that the fear of injury, with consequent haemorrhage, prevented him from taking part in any outdoor games.

Injection treatment was commenced with the stock solution used in
the treatment of varicose veins (Génévrier's solution). The needle was entered through sound skin near the margin of the tumour. In all some fourteen injections were given during a period of six months. The dosage commenced with 0.5 cubic centimetre and was gradually increased to 1 cubic centimetre. On two occasions slight sloughing occurred on the inner side of the lip owing to the needle having approached too near to the mucous surface. The sloughs separated without giving rise to any trouble. There was a remarkable absence of pain throughout the treatment.

Another case successfully treated was that of a soldier with a small nævus on the glans penis. On this occasion two injections of 0.25 cubic centimetre were sufficient to effect a cure.

My cases are necessarily few owing to lack of material, but the method appears to be so simple and effective that it seems worthy of a more extended trial.

AN INTERESTING CASE OF IMPACTED FRACTURE OF THE RADIUS.

By L. F. RICHMOND, M.D., B.S.

The following case is, I think, instructive enough to deserve recording on account of the slight degree of disability caused and to show the necessity of having all doubtful cases X-rayed.

Private T. B., aged 20, a recruit in the Durham Light Infantry, while leaving the gymnasium one morning fell and injured his left arm; he did