either of the large cavities oſ the breaſt and abdomen, and more eſpecially when they ſeem to run deep, they ſhould al­ways be opened as ſoon as the leaſt fluctuation of matter is diſcovered. For, when the resiſtance is on every side equal, they juſt as readily point inwardly as outwardly : and the conſequence oſ a large abſceſs burſting into either of the large cavities, is well known moſt frequently to prove fatal: An inſtance of which, in ths following caſe, with very little attention, might have been prevented. A ſurgeon oſ emi­nence, and of very extenſive practice, was applied to by **a** young healthy-looking man, with a large abſceſs upon the left side of his cheſt. A fluctuation of a fluid was, upon preſſure, very evidently diſcovered; and it was agreed, by other two practitioners who were preſent, that an open­ing ſhould be made to give vent to the matter. But the operator, being much engaged in buſineſs, could not fix on an earlier period for doing it than the third day from the patient’s applying to him : unluckily, however, the pa­tient died ſuddenly in his bed the night before the abſceſs was to have been opened. On examining the body, the tumor had disappeared entirely, without any external open­ing being obſervable ; and, on opening the thorax, it was found to have burſt inwardly upon the lungs, and produced immediate ſuffocation.

In every other circumſtance, however, except in the caſes alluded to, the rule in opening abſcesses is, as was already remarked, To allow a thorough ſuppuration to take place, before any vent whatever be given to the matter ; and it being then determined to lay the collection open, the next queſtion that occurs, is with reſpect to the manner of do­ing it.

There are three ways of opening an abſceſs ſo as to give an outlet to the matter ; by cauſtic, by inciſion, or by the introduction of a ſeton. The firſt is more agreeable to ti­mid patients, who are afraid of the pain of inciſion, but is attended with some inconveniences which render the method of inciſion much preferable. Cauſtic acts slowly, and pro­duces a long continued pain ; beſides, no kind of cauſtic has yet been invented, the effects of which can be confined to a certain determinate extent ; hence the patient is liable to ſuffer much unneceſſary pain, as the cauſtics commonly employed are either the lapis infernalis or lunar cauſtic. The abſeeſs is to have a slip of adheſive plaſter applied to it, with a ſlit cut in it of a ſize somewhat leſs than the opening is intended to be. This ſlit is to be filled with cauſtic redu­ced into a powder, and wetted to make it act more quickly. It is then to be covered over with a plaſter, and the whole is ſecured with a firm compreſs and bandage. The time neceſſary for the cauſtic to make a ſufficient opening will depend upon the thickneſs oſ the ſkin and ſtrength of the cauſtic ; but generally it requires ſeveral hours. When we find that an eschar is made, it is to be softened with any emollient ointment until it can be readily ſeparated ; after which, the matter is to be diſcharged, and the abiceſs treat­ed as one opened by inciſion.

The method of opening abſcesses by the knife is, to make an inciſion of ſuch a ſize as to give free vent to the matter. The opening is to be made in the under part of the tumor, that the matter may pais readily out. It has been a prac­tice among Turgeons either to open a large absceſs from end to end, or at leaſt through two-thirds of its length ; but from the bad conſequences which often attend this method, the lateſt practitioners have thought it better merely to give **a** free diſcharge to the matter, without expoſing the part to the action of the air.

The third method, viz. that by the ſeton, is now frequently employed. It has the advantage of being attended with little pain, emptying the abſceſs,in a gradual manner, and completely preventing the access of the air, which, in the other two methods, is often attended with bad conſequences ; and it frequently performs a cure in a much ſhorter time.

There are various inſtruments ſor introducing the ſeton: it may even frequently be done by a lancet and common probe ; but the inſtruments repreſented in Plate CCCCLXXXVII. fig. 1. and 2. are more frequently employed. One of theſe being threaded with glover’s ſoft ſilk, is to be introduced through the upper part of the tumor ; but if the blunt one (fig. 2.) be employed, it will be neceſſary to have the aſſiſtance of a lancet ; the inſtrument is then to be brought out at the under part of the tumor, and in this way the matter will be allowed to run gradually off.

The uſual mode of dreſſing an abſeeſs the firſt time is with dry lint. In the courſe of dreſſing, it will be proper to have regard to the ſituation of the abscess, and as much as poſſible to make the patient favour the diſcharge by his ordinary poſture ; and to this end alſo, the diſcharge muſt be aſſiſted by compreſs and bandage : the compreſs may be made of soft old linen, applied according to the nature of the part and the ſeaſon of the year. The frequency of dreſſing will depend on the quantity of diſcharge : once in 24 horns is ordinarily ſufficient; but ſometimes twice, or perhaps three times, is neceſſary.

Sect. II. *Of Gangrene.*

The other conſequence of inflammation is gangrene, which may terminate in mortification. When the colour of an in Hamed part changes to a dark red, when bliſters ariſe on it containing an ichorous fluid, we know that it has become gangrenous. When it becomes black, flaccid, and inſenſible, when it loses heat, and acquires a putrid: ſmell, it has proceeded to complete mortification. A gan­grene ſeldom affects thoſe who enjoy a good habit of body, though, even in them, it may be brought on accidentally by whatever deſtroys the texture of *a part ;* as contuſion, long continued preſſure, or whatever deprives *a part* of its nouriſhment. In like manner, cold, by putting a ſtop to the circulation, may produce gangrene, and frequently does ſo in cold climates. This comes on ſuddenly, without any pain or previous inflammation ; and the patient himſelf is fre­quently inſenſible of it, till he is informed of his ſituation by ſome other perſon.

A defect in the circulation, in extreme old age, frequently occaſions mortification in the extremities.

There are ſome inſtances of what is called *dry gangrene,* in which the parts continue totally mortified for a great length of time, without either turning very flaccid, or running into diſſolution. But ſuch cases never occur from inflammation ; they happen commonly from the flow of blood to ſuch parts being put a ſtop to by compreſſion of one kind or another, as tumors, ligatures, or other ſimilar cauſes, obſtructing the principal arteries which uſed to ſupply them ; which, when the ſtoppage of the circulation is complete, always occaſions a very slow, tedious, mortifica­tion ; and as the parts in ſuch inſtances are no longer ſupplied with freſh quantities of fluids, while a conſiderable evapo­ration muſt ſtill be going on, ſuch a degree of humidity cannot therefore poſſibly occur as does in other caſes of gangrene. So that ſpecies of the diſorder has, perhaps, with propriety enough, been termed the *dry gangrene.*

There is another variety of the diſeaſe termed *white gan­grene ;* in which the parts ſuppoſed mortified do not turn black, but retain nearly their former colour, &c. Whether ſuch a complaint, however, can with propriety be denomina­ted *gangrene* or not, may properly be doubted : but as it is chiefly that ſpecies of the diſorder which ſucceeds inflam­