however, that one material advantage expected from the operation of blood-letting, is the production of a ſtate of deliquium ; as, for inſtance, in caſes of ſtrangulated her­nia, where a general relaxation of the ſyſtem is ſometimes desirable. In all ſuch circumſtances, inſtead of a horizontal poſture, the more erect the patient is kept, the more readily will a ſtate of fainting be induced. The patient ought to be ſo placed, that the principal light of the apartment ſhall fall directly upon the part to be operated upon, that the vein to be opened may be made as apparent as poſſible.

II. The patient being properly ſeated, the next ſtep is, by means of a proper bandage of ſilk, linen, or woollen cloth, which has more elaſticity, ſo to compreſs the vein in­tended to be opened, as to prevent the blood from returning to the heart. An equal degree of preſſure ought to be ap­plied to all the other veins of the part : for if this be not at­tended to, the communication preſerved by the collateral correſponding branches would render the preſſure upon any one particular vein of very little importance. This preſſure upon the veins, by inducing an accumulation of their con­tents, tends to bring them more evidently into view, and conſequently renders it easier for the operator to effect a proper opening than he would otherwiſe find it. The pressure, however, ought never to be carried ſo far as to obſtruct the circulation in the correſponding arteries, otherwiſe no diſcharge of blood can take place. When we ſee that it has the effect of raiſing the veins, while at the ſame time the pulſation of the artery is diſtinctly felt in that part of the member which lies on the side of the ligature moſt diſtant from the heart, we may be certain that it is to a very proper degree, and that it ought not to be carried farther ; for by the ſwelling or the veins we are ſure that they are sufficiently compressed ; and by the arteries continuing to beat, it is evident that a continued flow of blood may be expected.

III. The reflux of blood to the heart being in this man­ner prevented, the next queſtion to be determined is, the beſt method of making an opening into the vein. Different inſtruments have been invented for this purpoſe ; but there are two only which have been retained in uſe, and which are all therefore that here require to be mentioned. Theſe are the lancet and the phlegm. This laſt, on being placed im­mediately on the part to be cut, is, by means of a ſpring, pushed ſuddenly into the vein, and produces an opening of the exact ſize of the inſtrument employed.

When it is determined to employ the lancet, which is by far the ſafeſt, the form of that inſtrument is next the object of attention. The broad-shouldered lancet ought to be laid entirely aside ; becauſe the broadneſs of its ſhoulders produ­ces always a wound in the external teguments of perhaps three times the ſize of the opening made in the vein ; a cir­cumſtance which adds no advantage whatever to the opera­tion ; on the contrary, it produces much unneceſſary pain ; renders it frequently a very difficult matter to command a ſtoppage of the blood ; and the wounds produced by it are commonly ſo extenſive as to be liable to terminate in partial ſuppurations.

The ſpear-pointed lancet, on the contrary, repreſented in Plate CCCCLXXXVII. fig. 8. is in every reſpect well cal­culated for the purpoſe of veneſection. From the acuteneſſs of its point, it enters the teguments and vein with very little pain ; which is with many patients a circumſtance of no ſmall importance. We are ſure of making the opening in the vein equal, or nearly ſo, to the orifice in the external te­guments ; and the diſcharge of blood produced by an open­ing made with one of theſe lancets, is commonly put a stop to with great eaſe immediately on removing the ligature upon the vein.

IV. The form of lancet being thus fixed upon, we come now to speak of the method of uſing it. The ſurgeon and patient being both properly ſeated, and the ligature having been applied ſor a ſhort ſpace of time in order to produce ſome degree of ſwelling in the veins, that vein is to be made choice of which, at the ſame time that it appears conſpicuously enough, is found to roll leſs than the others on being preſſed upon by the fingers. It is ſcarcely thought neceſ­ſary to obſerve here, that when a vein appears to be ſo im­mediately connected with a contiguous artery or tendon, as evidently to produce ſome riſk of wounding theſe parts in the operation, another vein not liable to ſuch hazard, if it can be procured, ought undoubtedly to be preferred. Veins may lie directly above both arteries and tendons, and yet no manner of risk be incurred by opening them, provided the operator is ſufficiently ſteady and attentive ; but it does now and then happen, that veins are ſo nearly and intimate­ly connected with theſe parts, as to render it hazardous even for the moſt dexterous ſurgeon to attempt this opera­tion.

The vein being at laſt made choice of, the ſurgeon, if he is to uſe his right-hand in the operation, takes a firm hold of the member from whence the blood is to be drawn with his left, and with the thumb of the ſame hand he is now to make ſuch a degree of preſſure upon the vein, about an inch and a half below the part where the orifice is to be made, as not only to render the ſkin and teguments ſome­what tenſe; but at the same time to interrupt for a little all communication between the under part of the vein and that portion of it lying between the ligature and the thumb pla­ced as thus directed.

The lancet being drawn out ſo as to form nearly a right angle with the ſcales, the operator now takes it between the finger and thumb oſ his right-hand ; and leaving at leaſt one half of the blade uncovered, he reſts his hand on the middle-finger, ring-finger, and little-finger, all placed as con­veniently as poſſible in the neighbourhood of the vein from whence the blood is to be taken ; and having puſhed the point of the inſtrument freely through the ſkin and tegu­ments into the vein, he now carries it forward in an oblique direction, till the orifice is of the ſize he inclines to have it; taking care, during the time of puſhing on the lancet, that its point be kept in as ſtraight a direction as poſſible, for fear of dipping into the parts below.

The inſtrument is now to be withdrawn ; and the ſur­geon, removing the thumb of his left hand, is to allow the vein to empty itſelf freely into the different cups previouſly provided for the purpoſe.

It is of importance to obſerve, that during the time the blood is diſcharging, the member ought to be kept in exactly the ſame poſture it was in when the lancet was firſt introduced : otherwiſe the orifice in the ſkin is apt to slip over the opening in the vein ; a circumſtance which always proves inconvenient, and on ſome occaſions produces a good deal of trouble by the blood from the vein inſinuating itſelf into the ſurrounding cellular ſubſtance.

V. When the vein is properly cut, and the orifice is made ſufficiently large, it rarely occurs that any difficulty is expe­rienced in procuring all the blood that is wanted. But when this laſt circumſtance occurs, from the patient beco­ming faintiſh, a ſtream of freſh air ought to be admitted to the apartment, wine or ſome other cordial ſhould be adminiſtered, and the patient ought to be laid in a horizon­tal poſture. By theſe means the faintiſhneſs will in general be ſoon removed : but if ſtill the blood ſhould not flow free­ly, the member ought to be put into all the variety of poſitions that can probably aſſiſt in bringing the openings of the ſkin and other teguments to correſpond with that of the vein ; which will ſoon be known to have happened by the