

renders the incision of the external oblique aponeurosis painless. The ilio-inguinal nerve is located on reflecting the external oblique aponeurosis, and is cocaineized, thus rendering practically the whole area involved non-sensitive. The parts supplied by the ilio-hypogastric and genito-crural are sufficiently narcotized by infiltration. By not cutting below the level of the external ring, all vessels of any moment are avoided. The sac, which, of course, has a different nerve supply, gives rise to little, if any, pain, so long as there is no forcible dragging on it.

The simplicity of this technic will appeal alike to the surgeon and the general practitioner.

Some of the advantages claimed for local analgesia in these cases are:

1. Pain is practically *nil*.
2. The passive condition of the patient renders haste unnecessary, and therefore makes for greater thoroughness.
3. Obviously greater safety to patient than with general narcosis.
4. Age, atheroma, lesions of kidney and heart offer no barrier, as in general narcosis.
5. In strangulated hernia local analgesia may be regarded as almost imperative, since it does away with any additional shock, enables patient to better control vomiting, and gives more time to decide on the circulation in the gut. ("In one instance the gut was wrapped in hot saline cloths for over an hour, until the circulation was established beyond a doubt.")
6. The greatest advantage of this method is perhaps the preservation of the structural integrity of the nerves in this area, thus preventing atrophy and weakening of the very portion of the abdominal wall which aids so much in the permanency of the cure.

Limitations to the use of this method are:

1. Fat is not œdematized by the cocaine solution, and consequently there is pain while incising it. "The fat subject can be operated upon under local anesthesia successfully, but not painlessly."
2. Very large, complicated herniæ give rise to pain only when the gut and omentum are dragged upon."

Prof. Bodine remarks: "Certain advantages are inherently associated with local analgesia. It imposes upon the surgeon respect for tissues, gentleness of manipulation amounting to daintiness. Blunt dissection, tearing or rubbing the sac from the cord with gauze pads is impossible. The number of times the wound