

that will allow of dressing the stump without in anyway disturbing the parts. I hope I may have an opportunity of showing this instrument to you upon some future occasion. You are all probably acquainted with the manner in which the barrels of our ordinary breech-loading fowling-pieces are dropped, so as to receive the cartridges. In a similar manner a catch placed under a portion of the splint allows of sufficient of that splint being dropped from beneath the stump to permit of the removal of the dressings and of their replacement without the slightest disturbance of the parts, and without giving rise to the slightest pain. I can assure you that in this way you can dress and redress an amputation stump without the patient's even knowing the applications are being changed. And to show you how carefully these operations have to be conducted, I may add that if during the change of the dressings the slightest jar of the apparatus is permitted, the patient will at once recognize the error in treatment by starting of the limb and complaints of pain.

**Pain from Emotional Irritations.**—Now there are many ways in which pain and discomfort may be induced. I will mention one condition. There are, what I have ventured to write upon, emotional irritations. I mentioned a case of this kind only yesterday, in visiting one of your hospitals, that of a child who had been cut for stone. I will give you another instance in point: A man lay in Kenton Ward, a ward which had come to me by descent through Sir James Paget and Mr. Stanley. The man had sustained a severe injury of his forearm. The muscles, and tendons, and nerves, indeed all there was to divide, save the bone, had been cut through in a machinery accident. We stitched all these structures together, and I suppose you do the same here; and we are hoping the day is not far distant when not only tendons, but nerves also, may be reunited and made to regain their function. Now I commonly dress these cases by swinging the extremity by means of a very simple apparatus. I take a slate, or rather the framework of a slate, and to this I attach a pad of sawdust, on which the arm is laid. The arm is then swung by means of pulleys and a bar fixed over the bed, the arm of the patient being counter-weighted by means of a graduated tin, filled with shot, so as to exactly balance the part suspended.

In this way the patient can, without an effort, raise or depress the part, and is even allowed sufficient liberty of movement to permit of his getting up and moving around his bed.

Now, although I thought I had made this man as comfortable as he possibly could be, yet he soon became irritable, and his temperature rose to 103° or 104°. There was nothing to account for this, save that he complained of the appara-

tus, and said that it irritated him. Now I always attend to the complaints of my patients, and you will always find they have some good reason, or at least, if not attended to will make themselves ill over nothing at all.

Well, I had to take it all down, and laid his arm simply upon the bed. At once he was relieved, the irritation was at an end, and the temperature fell to the normal point.

Now, gentlemen, I pray you always to attend to the slightest complaints of your patients. If you do not, some slight irritation, such as I have been describing to you, will vex and continue to vex them, which at last may grow into such an irritation as to produce not merely pain, but considerable constitutional disturbance.

**Importance of Drainage.**—But these rough mechanical movements are not the only condition which give rise to unrest in a wound. In these days, when we endeavor to secure union in a wound by first intention, we bring into close apposition the margins of the wound. But we know that in connection with all wounds there is a certain amount of blood-stained fluid necessarily effused, and if this remains locked up in a wound, what must of necessity ensue? Not only is the patient made restless, and pain occasioned by the swelling caused by the accumulation of the fluid, to say nothing of the risks of some one of those forms of constitutional disturbances which we speak of collectively under the name of blood-poisoning, but, as you can readily understand, the fluid, as it collects, of necessity separates more and more widely the parts, which, if they are to unite by primary union, or by granulation, must needs lie in absolute contact. Now, to avoid this cause of pain and irritation, all wounds must be effectually drained. It matters not what form of drainage-tube you may employ; sometimes a silver tube may be used or a piece of elastic tubing, or a bit of catgut, or that which I very frequently employ, a strip of gutta-percha tissue carried through the depth of the wound; but in some way drainage should be effectually secured, so that all this fluid may have a ready escape, and thus free the patient from the irritation which would otherwise necessarily be induced.

**Treatment of Abscess by Hyperdistention.**—The time is scarcely passed—indeed, if you will refer to any of the works on surgery of the present day, you will find it laid down as a rule that when you have a patient suffering with an abscess developed in the course of some chronic disease, it is better to leave the abscess to pursue its course, carrying mischief among the muscles, and widely diffusing such mischief in distant parts of the body, because it is stated, that when such an abscess is opened there is risk of grave constitutional disturbance, and sometimes even of inflammation of the abscess sac, leading to