

of a fall from a waggon about a year before, the main force of the fall being received upon the point of the left elbow. There was considerable soreness at the time, with subsequent sub-acute inflammation of the joint, which was treated at intervals variously by painting with iodine, poultices and blisters, and about two months previously to his arrival in the city an incision had been made posteriorly over the ulna, two inches below the elbow joint, and a small quantity of cheesy pus evacuated.

Careful interrogation of the lungs gave no evidence of any tubercular lesion, and the patient could recall no instance of hereditary taint. On examination of the arm, however, a diagnosis was made of tubercular caries of the bones entering into the formation of the elbow joint, and the patient was informed that the treatment advised was the complete excision of the joint. He demurred from this, and so was persuaded to have a radiograph of the diseased region made. This was done, and the photograph showing very clearly the damaged condition of the bones was sent to the patient and the nature of the operation fully explained to him.

In a few days word was received from him that he was ready to come in to the city at any time and have me "fix his arm."

On May 13th, by means of a single posterior incision, the joint was exposed. The synovial membrane was found in a pulpy condition, one-quarter of an inch in thickness, and the distended sac contained about four ounces of pus.

The overlying tissues were carefully dissected from the bones, special care being taken to guard the ulnar nerve from injury. Erosion of the cartilages covering all three bones was very marked, and the internal condyle of the humerus was extensively destroyed by the carious process. One inch of the humerus was first removed by a fine saw, but this not clearing the diseased tissue fully another half inch was sawn off. The ulna was shortened by $1\frac{3}{4}$ inches, and three-quarters of an inch of the radius was also removed.

The limb was then placed upon a wire splint flexed at somewhat more than a right angle. A drainage tube was inserted at the most dependent part of the wound. The tube was shortened