kept the swelling from increasing,t bu made it more painful. On August 28, I made an effort to detect fluid with the aspirating needle, a·d as I pressed with my finger on a point at the upper third of the thigh, I felt a grating sensation, and to my great surprise found it possible to bend the leg with the use of but little force, and got crepitus, showing complete destruction of the femur at that point.

I concluded to operate and remove a small portion of the diseased bone and wire the two ends together, giving the child a chance to get well with a leg two or three inches shorter than the opposite limb. I was afraid, however, that the disease extended over the whole length of the shaft of the femur, and therefore tried another plan to save the leg. On September 5, assisted by my friend Dr. Timothy Griffith, I made a long incision down between the rectus and vastus externus muscles, and about a pint of fluid serum and pus escaped.

The whole shaft was found in a necrosed condition, extending from the lesser trochanter down to within one and a half inches of the knee joint. There was nothing left but a shell of bone; evidently the disease had started in the interior of the bone (in the medullary canal), for the marrow had been almost completely destroyed, and there had been more destruction of bone structure on the inside than on the periosteal surface. The periosteum had been separated from the bone with the exception of a few points which were points of insertion of muscles along the linea aspera. I succeeded in removing the whole shaft with only slight injury to the periosteum.

After removal of the bone I washed out the cavity, first with a 1-1000, and then a 1-2000 solution of the bichloride of mercury, and then drilled a hole in the stump at the knee, and another through the upper stump at the lesser trochanter, and inserted a strong silver wire extending from one stump to the other, taking care to have the length of the diseased leg correspond with that of the other limb. Between the two strands of silver wire I placed a roll of catgut suture and then poured in around this a large quantity of boracic acid. My object in using the roll of catgut was to replace the bone removed by something of nearly the same size, and maintain the proper shape of the leg until there would be a new formation of bone substance. I inserted a small drainage tube, sewed up the wound and dressed it in the usual antiseptic way, and applied an anterior felt splint, extending from the ankle to the crest of the ilium, using a bandage round the body to keep the upper part of the splint in position.

The little patient had a good night's rest following the operation. In forty-eight hours I found the dressing wet and removed it, and found a quantity of serious fluid coming from the drainage tube. I irrigated the wound with carbolic acid solution and put on a new dressing. In three days more the same procedure had to be repeated, and at this time, which was five days after the operation, I withdrew the drainage tube and the serous discharge ceased, and everything progressed very satisfactorily. I occasionally removed the dressing to see that everything was in proper shape, as it was almost impossible to prevent the child from shifting the splint more or less to one side or the other. On October 29, I removed the splint and dressing for good. November 17, he was allowed to stand on his leg; and November 26, 1889, he was able to walk on it with considerable ease. The shape appears to be quite perfect, except that the new bone appears to be a little thicker than that of the other leg and half an inch shorter. During the time of treatment the child was given the syr. hypophosphites, and he is now the very picture of health and is able to walk with but little lameness.—*International Journal of Surgery.*

A Source of Puerperal Fever.—A series of deaths at Limehouse this year shows once again how disease in the accoucheur or midwife may cause puerperal fever. In this instance the midwife was suffering from tertiary syphilitic mischief of the nasal passages. Even so, it is very likely that the infection was conveyed by the fingers, so that if she had thoroughly cleansed her hands and disinfected them by soaking in an efficient antiseptic, no harm would have resulted.