should be opened immediately, and that the curvature could be attended to subsequently. I prefer, however, to reverse that order of procedure, and to support the back before touching the abscess, and for this reason: The pus here present in the sheath of the psoas muscle is acting as a sort of splint to the diseased vertebræ, and if we remove this before providing some equivalent support, the weight of the body above, coming suddenly to bear on the carious bones, may do incalculable mischief. We will, therefore, first apply Sayre's plaster of paris jacket, and then open the abscess.

You will notice that we suspend the patient while applying the bandages. Many surgeons, and among them I find my friend Mr. Edmund Owen of St. Mary's Hospital, London, have entirely discarded this part of Sayre's apparatus, and adapt the bandages with the patient simply standing before them. Sayre teaches that when a person with this disease is suspended, the angle of curvature is considerably reduced, and that this is the case, to a slight extent, I have no doubt; indeed I have seen him demonstrate the fact. But is this improvement in the condition of curvature lasting? Mr. Owen thinks not, and hence he has discarded the tripod. I am also of his opinion, after having had some considerable experience with the method, but I still employ suspension in a way, because I find that if the straps be properly and evenly adapted, and if the patient be supported rather than suspended, he can often bear the application of the bandages with less fatigue than if required to stand unsupported. to see what advantage the "hammock method" of applying the jacket has over this, excepting in the case of a very weak or nervous person.

The jacket having been now applied, we will turn our attention to the abscess. In some of the text-books you are advised to be in no hurry about opening a psoas abscess, and it is often a difficult question to decide exactly when to interfere. If, however, the abscess is rapid'y increasing in size, and has reached the dimensions of a goose's egg below Poupart's ligament, as in this case, then there can be no doubt of the advisability of opening it. Now, how can we best give exit to this pus? Of course the