longed treatment, more radical interference is no doubt justified even early in the disease.

My ideas as to the importance of early radical operation are perhaps not warranted by statistics, but I would just like to say that, after careful examination of available statistics, they appeared to me peculiarly unreliable and indefinite, the patient's career, subsequent to apparent recovery, not having been followed for a sufficient length of time.

Perhaps my ideas are also biased by the occurrence in my practice within the last two years of two deaths, resulting from tubercle of the kneejoint. Erosion was done in each case with every precaution. The one, a child of five years, died of tubercular meningitis four months after the operation, when we supposed he was making an excellent recovery. The other, a married lady, set. 22, seen in consultation by my colleague, Dr. Teskey, died a short time ago of pulmonary phthisis. I am of opinion that free and early excision would have saved these two lives. The post mortem table, too, has furnished me with several examples of the imperfect removal of the disease.

For the sake, then, of obtaining the opinions of those present upon this most important subject of treatment, I would make the following propositions:

I. In the early stage, i.e., in the stage of socalled "growing pains," slight limp and swelling absolute rest to the joint with tonic treatment and improved hygienic surroundings for the patient. Persevere longer in the child than in the adult.

II. The moment caseation or retrograde change begins—a somewhat free incision with erosion, if necessary and possible; but should the process have extended beyond the cancellous ends of the bones, immediate excision is indicated. Never remain satisfied with erosion unless absolutely positive you have got entirely beyond the disease.

III. If, on opening the joint, the disease be found confined to the synovial membrane, the less radical operation of aspiration is indicated.

IV. If the disease be as yet confined to the end of the long bone and the joint not yet invaded, removal of dead bone and diseased products with the sharp spoon should be tried, with the hope of arresting the process. But should the destructive process still continue, excision is indicated.

V. In those joints where thorough erosion is

impossible, excision would be indicated at that stage at which erosion would be done in such joints as the knee.

VI. The early radical operation shortens the period of suffering.

VII. Frequently, in case of the poor man, instead of the word excision in the above propositions we should read "amputation."

PERI-UTERINE CELLULITIS.*

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In this age of progress and mental activity, when it is our boast that we know more than what has been known in any other period of time; in this age of discovery in the microscopical world, when the atom itself has nearly been found, and molecules are mapped out and bounded: in this age of physiological research when the vital process is observed in Nature's laboratory, and the vital principle is just beyond the horizon; in this age when the female pelvis explored from within and without, is no longer a mere clausum, and the female organs of reproduction are exposed to the attack of the surgeon's knife with impunity, and it is generally believed that the average woman could get along very well with, say onehalf of them; in this age of speculation and theory; it is well for us sometimes to sit down by the bedside and giving nature a fair field and no favors, see how she eliminates poisons from the system, and repairs the ravages of disease.

The female pelvis is exposed to a great number of mishaps. During menstruation the vascular congestion is great, and a slight chill at any time may change the physiological into the pathological. Copulation brings with it congestion, sometimes physical injury, and it may be animal poisons. Parturition has as its accompanying pressure or engorgement, bruising, laceration, and a general disturbance of the vascular and nervous supply. And with nature's powers thus weakened the omnipresent germs find a nidus, and the wonder is that their ravages are not more serious than we find them. During resolution, absorption of poisonous matter, or extension of inflammation may cause serious mischief. Disease, too, may spread from

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