

if flexed. In long standing cases, the force required is considerable; sometimes the whole weight of the body is necessary. When the limb yields to the external force, the amount of flexion is preserved until the next trial; the limb being exercised, passively, during the interval. A great degree of flexion is not to be desired at once; and the more cautiously and patiently the limb is managed, the less danger of reaction, and the greater the probability of success. The inflammation set up when so managed is very trifling; I have not seen it sufficient to interfere with the treatment or retard the cure. A couple of months are frequently necessary to restore the integrity of a joint; three or four weeks are sometimes sufficient. It is absolutely requisite, however, before interfering with a joint, that there should be no trace of inflammation, and that the patient should exhibit no tendency to scrofula, and this the more especially if the anchylosis be the result of scrofulous inflammation or ulceration. I might furnish numerous examples of the success attending the judicious management of anchylosed limbs whereby their function has been restored—one in particular of twelve years standing—under the care of Langenbeck—but want of space forbids, and as I have had an opportunity of testing the matter myself, I cite it *par preference*.

CASE.—Anchylosis of the Right Elbow.—J. S., a stout, healthy boy of about 13 (?) years of age, or, according to his *intelligent* parent, between 11 and 15, came to see me early in October last. It appears, from his statement, that in July of 1852, he had a severe attack of small pox, which, to use his mother's expression, "settled in the joint." Long after the eruption had disappeared, the elbow continued red, acutely painful, and swolln to an enormous size. By the employment of antiphlogistics, the pain and redness disappeared, but the joint remained stiff; and by unpardonable negligence on the part of the attendant, the limb was allowed to anchylose in a straight position.

Present condition, Oct. 2, 1853.—The arm is perfectly straight; muscles of the arm very much atrophied; elbow of the natural color, nearly twice the size of the left, but not painful. Anchylosis is *complete, there not being the slightest degree of motion*. Circumstances prevented his coming daily in October, but he visited me again in November. I administered chloroform, (and here I may remark that it requires more of the anæsthetic than is necessary for surgical operations generally); and when the muscles ceased to offer any resistance, I commenced flexion of the limb, assisted by my student, Mr. William Wilson. The first day I gained about an inch, and this required nearly all the strength of which I was possessed, so firmly were the bones united. I exercised the limb daily, and every third or fourth day repeated the chloroform, preserving always what I gained. On the 12th day, the arm was bent at an angle