cord were not completely destroyed by the slight pressure, and the pelvic viscera were not very seriously injured. On examination of fragments of os innominatum, one would suppose that a rectal examination would have enabled him to discover clearly the nature of the fracture, but on account of the condition of the patient, the examination was not so thorough as it would otherwise have been. It is probable that many fractures of the pelvic bones are not clearly diagnosed (or in some cases not recognized at all), as there is often so little displacement, and, in consequence, the signs are rather obscure. In this case, although the innominate bone was broken into 7 distinct pieces, there was practically no displacement, and no injury to viscera excepting a slight laceration of It is probable that the patient would have made a good recovery if there had been no injury to spine.

DISLOCATION OF THE SHOULDER.

A Contribution in Support of Kelley's Method of Reduction.

Mrs. —, widow, charwoman, aged about 40 presented herself at the out-patient department, Toronto General Hospital, saying that some thirteen days previously, while returning from work in the evening, she had slipped and fallen and hurt her shoulder. At the time of examination there was no swelling nor bruising, but marked flattening of the left shoulder existed, with some prominence and marked tenderness beneath the coracoid process. underhand motions of the arm were pretty free, and her hand could be placed on the opposite shoulder, and even on the top of the head with The surgeon's fingers considerable facility. could be readily made to explore the glenoid cavity, as the patient was thin, and the lower portion of the head could be felt in the axilla upon elevation and rotation of the arm. free movement of the arm and the capacity to place the hand, on the opposite shoulder and on the head were certainly unusual, but Dugas's test and the other evidences of luxation mentioned were too positive to be mistaken. was no shortening of the limb. Reduction was first attempted by the method recommended by

Kocher, at the late meeting of the International Medical Congress in London. Kocher's method is as follows:-The patient is seated, with the surgeon on his left hand. The elbowjoint is first to be flexed to a right angle, and the joint firmly pressed against the side of the chest, then, while holding the elbow in contact with the body, the arm is to be slowly, gently, and steadily rotated out until firm resistance is encountered; then, maintaining this rotation, the arm is to be raised forwards and a little in, and lastly to be rotated in, and the hand brought towards the opposite shoulder. anæsthetic is needed, and Ceppi says the method is especially valuable in old dislocations.

This was repeated a second time without Kelley's method (which consists in placing the patient on a firm table of convenient height, lying upon the back so as to fix the scapula by the weight of the body, with the side of the luxation drawn well to the edge, while the surgeon extends the arm to a right angle with the body, and then places one of his hips against the patient's side well up in the axilla, and draws the extended arm around his pelvis, holding the hand firmly fixed upon his ilium, after which position is secured, he suddenly or slowly rotates his body on its vertical axis until his back lies parallel with the patient's side), was then tried, and with a minimum of effort was at once crowned with complete success, some tearing of tissue being plainly heard, and the head of the bone returning to its socket with an audible and sensible snap.

CLINICAL LECTURE

GIVEN BY DR. J. E. GRAHAM, IN TORONTO GEN'L HOSP.

Tinea Kerion. — The vegetable parasites which grow on the skin are:—1. Tricophyton Tonsurans of Tinea Tonsurans. 2. Achorion Schönleinii of Favus. 3. Microsporon Furfur of Pityriasis Versicolor.

The first variety, the parasite of ordinary ring-worm, grows on any part of the body, and when examined under the microscope is found to be made up of small round spores, often arranged in the filaments of a mycelium.