

cially is this the case when no deformity has yet occurred. You will often notice, also, that if you extend the spine by separating your knees in this fashion, the child lying across them, you give great relief, as the diseased surfaces are kept apart for the moment. I pointed out to you, on a former occasion, that the grunting respiration, which is often so remarkable in cases where the disease is higher up, at once ceases when this method of extension is practised. I would caution you, however, against too forcible extension, as dislocation of the bones and irreparable injury to the cord might readily occur.

The case, then, is one of angular or antero-posterior curvature, or Pott's disease of the spine. But has the swelling in the groin anything to do with the back trouble? The gentlemen, whose turn it is to diagnose, are of the opinion that this is a psoas abscess, and hence that the two conditions are directly connected. Let us get at the truth by that admirable process of exclusion. We think it is not hernia, because we find the femoral vessels to the inner side of it; besides, it fluctuates, and when the child is put in the recumbent position it gradually subsides, to return as gradually when he is made to stand again. It is well to examine the condition of the hip, because we know that in a small percentage of cases the bursa of the conjoined tendon of the psoas and iliacus muscles has a direct communication with the capsule of the hip joint, and in abscess of the latter, the pus will, perhaps, appear first in this very situation. There seems to be nothing wrong with the hip joint. I think we can readily exclude other conditions, such as glandular or fatty tumors, soft cancer, pelvic abscess, &c. The pus of an empyema has been known to find its way behind the diaphragm, and into the psoas sheath, making its presence known for the first time below Poupart's ligament. I think, then, there can be no two opinions about the nature of this swelling; but in order that there may be no mistake, we will use this valuable little detective, the hypodermic syringe, which at once demonstrates the presence of pus.

Now comes the important question, how can we best treat this case? Many of you would naturally recommend that the abscess