articulation of the diseased side was quite healthy, and the teeth sound but loose in their sockets. That portion of the disease within the mouth gave the same sensation when handled, as though it was composed of a number of egg shells placed within a membraneous bag, each shell of bone yielding to the pressure applied. Having requested Drs. Morrin and Sewell to examine the case, and no doubt existing regarding the disease, which was rapidly extending itself to the opposite side, it was proposed, as the only means of saving the patient, to remove the was and bone, which proposition was acceded to by the patient: and on the 30th May, with the kind assistance of Drs. Morrin, Sewell, and Watt, I proceeded to perform the operation requisite, in the following manner: The patient was seated with her head reclining on Dr. Watt's breast; an incision was then made, commencing opposite the left ear extending along the ramus and base of the tumour, to opposite the mental foramen of the right side; a second was then made from the last mentioned point to the free edge of lip, and the superior flap thus delineated having been dissected upwards, I proceeded to remove two teeth; viz, the canine and lateral incisor, between the sockets of which the bone was divided by means of the saw and Liston's cutting for ceps; the tumour was then grasped, and an inner incision made along its internal length—and the coronoid process brought on a level with the base of the zigoma, and detached from its temporal muscle; the capsule of the joint was then opened and the bone disarticulated. The integuments covering the lower portion of the tumour were then dissected from the lower flap, and the mass removed. I may mention that there was some delay in disarticulating, in consequence of the tumour breaking in two when used as a lever. There were only three arteries divided requiring ligatures; a portion of lint was placed within the flaps which quiring ligatures; a portion of lint was placed within the flaps which were approximated, and after an hour secured by a few sutures. The patient bore the operation, which lasted twenty-two minutes with great fortitude, and lost about ten or twelve ounces of blook. It is well to remark that previous to dividing the lingual muscles, an assistant had to secure the tongue for a few minutes as there we a great deal of spasm which might have choked the patient of drawing that organ backwards, &c. On the third day the dressing were removed, when the external incision was found to have healed the first intention approach as the first intention approach when the secure and the light security of the first intention approach when the external incision was found to have healed the first intention approach and the light security of the first intention approach and the first intention approach as the first intention of the first intention approach as the first intention approach as the first intention of the by the first intention, except where the ligatures prevented. The sutures were removed and fresh isinglass plaster applied. The