

offer the method by which this operation, in our opinion, can be most effectually and readily accomplished.

The removal of the diseased head of the femur may be accomplished in the following manner:—A circular incision must be made over the hip-joint, with its convexity looking downwards, and passing at least two inches above the trochanter major, the flap must be raised by careful dissection, and any vessels that may be cut, tied as we proceed, until we expose the capsular ligament; if this appears strong and not greatly diseased, by rotating the thigh outward and abducting it from the body we shall expose the weakest point in the capsular ligament, and having made a considerable opening into it, we may pass the finger down into the joint. Having fully explored the amount of disease, and become quite convinced from the amount of ulcerative absorption that the disease must progress, we may introduce a small saw, and cut through the neck of the bone within the capsular ligaments. The diseased bone is now easily removed from the cotyloid cavity, the proportions between the parts being now greatly changed—the head and neck of the femur being diminished by ulceration, and the cotyloid cavity enlarged by the distention of the contained matter—the bone easily escapes from its cavity, and, after cutting the ligamentum teres, is removed with facility from the joint. The round ligament is most commonly implicated in the ulcerative action that affects the hip-joint, so that the diseased bone may most commonly be removed without any impediment from the already divided ligaments. Were the capsular ligaments already destroyed, and the neighbouring areola tissue not largely implicated in the disease, the operation might evidently be considerable facilitated, although the positive result might not be so satisfactory. After the removal of the head of the bone, the parts are to be brought together and supported with three or four sutures, aided by sticking plaster and bandage. The limb must now be placed upon a well padded splint, so as to preserve the limb perfectly free from any movement, and keep it extended in its proper position.

After the head of the thigh-bone has been removed from the cotyloid cavity, the constitutional irritation generally subsides, the ulcerative action is arrested, the purulent discharge by degrees ceases, and a new and healthy action pervades the diseased parts; the disease of the hip-joint terminates in the formation of a new joint, or a complete ankylosis of the parts which remain of the old one. Our hopes of the formation of a new joint must rest upon the