

in January, 1822, passed the board. After practising for a time at Ancaster with his uncle, he went to Chicago and there spent the rest of his life.

But Dr. Sumner was charged with other statements concerning Dr. Hunter. He said that Dr. Hunter had destroyed Mary Gilmour; that he understood he had taken five quarts of blood from her, and caused her death. To another witness he had said it was a d——d pity they hadn't employed Granny Huff and two or three men and they might have killed her sooner than they did, bleeding her five or six times, Hunter had murdered the girl.

One, perhaps, would not be inclined to find much fault with Dr. Sumner's characterization of the treatment if he had his facts right—and certainly there is no evidence that his facts were not right. But those were the days of heroic measures—and one can only pity poor Mary Gilmour, bled white in the name of science.

The main complaint is that the defendant said of the plaintiff that he was totally ignorant of the medical profession. He was proved to have said that Hunter was nothing but a butcher in Niagara; that he was a poor ignorant creature and knew nothing about doctoring; that the bleeding of Mary Gilmour was the cursedest piece of work he ever saw; that the plaintiff was not a medical man at all; that he had given Peggy Berry some drops which put her to sleep and she died immediately, "a devil of a case," and some other like choice expressions.

Very little defence was offered and the jury found a verdict for the plaintiff for £5, or \$20—not an extravagant sum, we would say, under all the circumstances. The verdict was not appealed from.

THE SURGICAL TREATMENT OF ARTHRITIS OF INFECTIOUS ORIGIN AND THE METHODS APPROPRIATE TO SPECIAL CASES.*

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IN selecting a subject to bring before you to-night I was influenced largely by a desire to discuss some of the recent surgical advances in the management of damaged joints. Such cases are cropping out in the practice of general surgeons with considerable frequency. In former times the treatment of ankylosis was about as far as the interest of the surgeon went in joint disease. In such conditions the principal question for him to decide was, to what extent may ankylosis be overcome. In the present day the question is how far and in what way has the usefulness of a joint become impaired and what method of

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