

septic precautions about six inches above the knee, by an anterior skin flap and posterior transfixion flap. A large rubber drain was introduced at the outer angle of the wound, and the stump dressed with Lister's double cyanide gauze.

On examination of the amputated limb, an abscess was found extending from the joint nearly up to the point of amputation. The joint surfaces were completely eroded and the bone found very soft and brittle. The temperature became normal on the morning after operation, and remained so throughout.

*Feb. 18th.*—General condition markedly improved, appetite hearty, no pain in stump.

*Feb. 22nd.*—Stump dressed for the first time; the wound found remarkably healthy; sutures and drains removed.

From this time out the progress was uninterrupted and he gained flesh rapidly. He was discharged Nov. 6th, 1890, with the stump entirely healed; stouter and in better health than he had been for years previous.

CASE II.—*Perineal abscess; Sloughing of urethral wall; Subsequent urethrotomy; Recovery.*

J. H., aged 32, waiter, admitted Sept. 8th, 1890, complaining of weakness, pain and swelling in perineum, frequency of micturition, considerable constitutional disturbance. Had chancre in 1880, and gonorrhœa two years later. Until about six months ago he drank freely. About a month before admission he first noticed difficulty and frequency of micturition. About a week previous to admission these symptoms became greatly exaggerated and a silver catheter was passed occasionally by his physician. The use of this instrument caused great pain, and the swelling appeared in the perineum shortly after its first passage. On admission there was a fluctuating tumour, about the size of a man's fist, situated along the scrotal and perineal portion of the urethra; penis and scrotum very cedematous; alkaline urine voided in drops every few minutes and contained a large quantity of pus; patient pale and exhausted; temperature 103°.

*Sept. 9th.*—Patient etherized; a sound was passed down the