

double, each side got an application, the right about twelve and the left about eight to ten minutes. This brought on a browning of the skin on the right side with slight indications on the left. Treatments were suspended with one exception for nine days. The pains were greatly relieved and the lumps diminished. A slight X-ray burn developed on the right side along the line of incision. This was healed completely about a week ago. Eight other exposures were given to such of the parts as were considered suitable—three or four to the lump between the two heads of attachment of the sterno-mastoid below on the left side; two or three to the parts surrounding the right ear, and three or four to the upper and outer walls of the antrum, reaching over to the centre of the nose on the same side. In all, sixteen or seventeen double treatments have been given. At first there was a pronounced diminution in the size of the lumps and a decided lessening of the pain. Scarcely any trace of the infiltration could be felt in the right side when the ulceration began. The pain, while not completely removed, has been materially relieved. His general health also improved. No treatment has been given to the sides of the neck for over five weeks, owing to the X-ray burn on the right side, and the evidence that the same was not far off on the other side. Renewed advancement and extension has been observed in both sides for the past ten days or two weeks, with a return of the pain. It is a difficult case to treat, the exact location of the trouble in the right side of the head being hard to get at, even if it could be accurately located. Mr. B. has kindly consented to allow me to present him to the association.

*Fractures of the Femur.*—My opportunities for the past twelve years, although not extensive, have impressed me with the fact that the results obtained in fractures of this bone are not often satisfactory. Probably no very great disability results from an inch or two of overlapping and slight bending at the fracture, or a good deal of bending with little overlapping with or without rotation. That they exist in nearly all cases I am convinced from fluoroscopic examination of quite a large number of cases extending over six years. No matter how skilful and careful the attending physician may be, perfect apposition and position of the fragments are not likely to follow. This is due to the inability of the operator to correctly adjust the fragments by the sense of touch, guided as he may be by a good eye and a full knowledge of the anatomy of the bone and muscles acting. It is not a question so much of keeping the fragments in proper position as it is one of getting them into proper position. The extensive swelling from laceration of the tissues by