In the subsequent treatment, slight suppuration occurred at the inner angle of the wound in the soft parts; the remainder of the wound united by first intention. There was no synovitis. The patient remained in bed two months and a half, afterwards he walked about with the aid of a cane.

March 1. Three months after the operation, the fragments were united firmly. When standing erect, he could advance his right foot to the front, without previously flexing the knee; and when lying down he could raise his knee from the couch, the limb being extended, without previously flexing the knee. It was clear that the union of the fragments was completed. He could walk, but could not flex the knee. Though not anchylosed, the movement of the knee was restricted, and this was due to the fact that the patella was attached by adhesions, and could not be moved from side to side when the leg was extended. To remove this disability, massage and passive motion were tried for two weeks unavailingly; and, finally, as the patient would not be satisfied with the result which had been attained, I decided to try forcible breaking-up of the adhesions.

March 6, 1894. The patient having been chloroformed, a stout tenotome was introduced and some of the patella adhesions severed. The leg was then grasped and flexed on the thigh; some adhesions yielded easily, but on continuing the flexion the patella was fractured at the junction of its upper and middle thirds above the place where it had been sutured. The fracture was partial, there being little separation, and the parts came together perfectly when the limb was extended. The amount of flexion gained at the knee-joint was equal to a right angle. The limb was subsequently bandaged in extension to a posterior splint and kept at rest for fourteen days. Passive motion and massage were then practised regularly for a month. The last fracture in the patella healed readily, and when he left the hospital about the middle of May the patient was able to walk without difficulty. In June, the following month, he went to work at a brewery, and, though steadily engaged there up to the present time, he has not lost a day.

March 1, 1895. When the leg is extended, the patella on being grasped, can be moved freely from side to side. The leg can be flexed at a right angle, and when extended the heel can be raised from the couch without flexing the knee. The quadriceps femoris, which, from long disuse, had become wasted, is enlarging, the right thigh above the knee being only half an inch smaller than its fellow. He walks well and lifts heavy weights without fear.

REMARKS.

I claim to have devised a method of introducing the wire sutures, which, if not original, at least facilitates the most difficult part of this operation. After the holes are drilled opposite each other in the fragments of the patella the silver wire is pushed down through one hole in the upper piece and an aluminium needle, with a eye in its point, is pushed through the opposite hole in the lower piece. When the silver wire appears in the gap between the two pieces, it is caught in the eye of the needle, deftly twisted, and the needle