

General Hospital) goes still further in his advocacy of the operative treatment of simple fractures, so far, indeed, as to say, that a surgeon who does not *plate* a simple fracture of a bone, is guilty of criminal negligence.

In objection to the plating or wiring of fractures, it is contended, that an incision in the soft parts—involving danger of sepsis—is required, that it is difficult to keep the tracts in which the metal supports are placed in an aseptic state, that the screws or wires cause rarefaction of bone. From his own experience, Dr. Starr refutes the charge that rarefaction of bone is caused by the presence of screws in bone. Neither has he found that septic conditions arise from the presence of steel plates and screws in fractured bones. The danger arising from an incision in the soft parts he did not mention, taking it for granted, probably, that, if the operation was properly done, and the tissues efficiently guarded, no septic results would follow.

A good many surgeons think that, in the majority of simple fractures with marked displacement, good results are obtained if an anesthetic is given during the reduction of the fracture, and sufficient extension is maintained after its reduction. Even if this be true in the main, it must be conceded, that the evidence of marked deformity in fractured bones, treated by old-time methods, as seen in museums of surgery, or observed in skiagraphs printed in surgical works, proves that there are many notable excep-