

quharson merely mentions it, giving the emetic dose at 1/15 grain hypodermically. It has been in use for several years. I was surprised at the time to find that the 1879 edition of Ringer's Therapeutics did not mention it.

### A CASE OF HIP DISEASE, WITH REMARKS.

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Eveline B——, aged 11, first came under my care on the 19th April, 1882. The following history of her ailment is derived from the patient's parent and the little patient herself :—

The child was always very active and full of life. When about six years of age, while at the sea-side in England, she, when running, met with a fall. She came to the ground with the left leg extended in an unnatural manner, and was unable to rise or walk. She was carried to her room, and for a day or two was lame, and then seemed to be all right. About a year later she was struck by a playmate with a poker. From the description given of the place, it is likely that the seat of injury was over some portion of the crest of the ileum of the left side. However, the blow was not followed by any immediate trouble. This occurred in the month of November, 1877. At the beginning of January following she was siezed with attacks of violent pain in the left groin. They came on with remarkable regularity twice a day, lasting from eleven to twelve in the morning, and from six to seven in the evening. These paroxysms continued for just three weeks. The pain was so severe that she would give vent to loud screams. There were neither swelling nor redness observable anywhere. They believed the attacks were due to rheumatism or growing pains. Between the paroxysms she could walk about, and in every way appeared to be quite well. In the following September, 1878, the child began to limp. The pain was now continuous, but never so

severe as before. By the following March, 1879, she had become much worse, and for the first time medical aid was procured, the consulting surgeon to the Royal Infirmary, Manchester, being consulted. He regarded it as a case of hip-joint disease, and treated the patient by extension with the pulley and a three pound weight. This was continued for three or four weeks, when the surgeon recommended her removal to the Children's Hospital, where he could treat her to better advantage. At this time there was a little swelling of the part. The day after admission an operation was performed to remove an accumulation of fluid in the joint. They did not learn as to the quantity or character of the fluid removed. A long splint was then applied, which remained on for eight weeks. A starch bandage was now substituted, extending from the waist, which it surrounded, to the leg below the knee, and the child returned home. The bandage remained on until December, having been used for about six months. During this time she had gone about on crutches. The general health had not at any time been much impaired. When the starch bandage was taken off not much change was observed in the appearance of the hip; the limb seemed thinner and straighter. In the following month, January, 1880, a small swelling appeared two inches above the knee. A scar marks the place, which is at the outer margin of the rectus femoris. A week later the abscess opened and discharged about half a pint of creamy, healthy-looking matter. The surgeon, who now again saw the patient, expressed no opinion as to the source of the matter, and recommended the application of carbolized oil. Meanwhile the patient was going about on crutches, always avoiding the use of the limb as much as possible, by the advice of the surgeon. Her health still remained very good.

In July, 1880, she sailed with her parents for Canada. While on the voyage the discharge ceased. The limb continued in