

Turner gives a full and fairly accurate account of the fractures and the existing method of treating them—he seems just to have missed the extension pulley. Perfectly conscious of the necessity of the “reposition of the fractured parts and their retention, when replaced, till Nature, by the intervention of a callus has cemented their extremities”; and of extension in reducing the fracture; using the fracture box, “in which the leg is placed with the two sides or wings to be let down at pleasure by their hinges as does the foot-board”; and where he had a compound fracture, with a large wound on the gastrocnemius, employing a box with **a double bottom**, the upper slung on tapes which could be drawn up by means of a pulley above; recognizing the “great difficulty . . . to maintain such a uniform extension that the ends of the bone may lie in a direct line the one to the other whilst the . . . callus is forming and becoming ossify’d”; and the extreme importance of keeping a due extension “to avoid shortening and lameness”—still he has no mechanical means of extension.

Turner’s work is full of instructive cases—by some thought to be its greatest value—and of sound, common sense directions. Leaving aside his fondness for topical applications and the usual obsession as to the value of bleeding,¹⁹ his practice would stand comparison with modern ways.

While it is probable that the practising surgeon would find most interest in the very many well reported cases, to an amateur like myself there are more interesting features. One is the *Tabula Aetiologica* or dictionary of technical terms and their origin. Many words are given, most of which are still with us, but some are outworn—no one uses the “*Aegyptiacum*, an ointment prepared of verdi-grease, honey and vinegar”, or the “*Linimentum Arcae*” for wounds; no one believes in Von Helmont’s *Archaeus*, whom he set up as a “vice god to superintend the animal *Fabric* or *Oeconomy* thereof”, and our “bilious juice” is not guilty of assation or adustion; no one says “*Bregma*” when he means *sinciput* or “cardiac” for “cordial” (perhaps few even say “cordial” as applied to a draught, at least since the celebrated 16th); the surgeon no longer knows “*catagmatics*”, medicines to promote a callus, being content to rely upon the old *vis medicatrix naturae* and few could define “*ecpiesma*”, “*fotus*”, “*saburra*”, the physiologist knows nothing of *crasis*, “the temper of the blood peculiar to each constitution”, and would not know what was meant by the “*Emporium*”; while he is well acquainted with the *Parotids*, he would hesitate to call them “*Emunctories of the Brain*”—the anatomist does not often, if at all, speak of *Ginglymus*, the physician is ignorant of *labrisulcium*. The druggist does not keep Mith-