

Joints of the upper extremity that are painfully sensitive, and in which some displacement has taken place, are immobilized, until the pain and deformity subside.

In the out-patient clinics of the University of Bonn and district, Bier employs his treatment, with excellent results.

Joint tuberculosis is very prevalent in some parts of Germany, and where there are so many cases, it is neither possible nor advisable to provide a bed for each case. Many of the cases are therefore treated in the out-patient department by their own physician, under the direction of the chief of the clinic, and the bandages are applied for the first few weeks under his supervision. The patient remains sitting for an hour, and during that time the bandage is inspected to see that it is acting properly. Later, the patient's physician, with his additional knowledge of the method, looks after his patient at home; and finally, the friends, if they can be relied upon, are permitted to continue the treatment. The patient himself soon learns to know the feeling of a properly applied bandage, and can thus aid its application. The physician sees the patient at his home from time to time, and should complications set in—for example, cold abscesses—the physician brings his case to the clinic, the abscesses are opened, and the pus evacuated by the cupping-glass. Where the friends are intelligent, they can be instructed in the use of the cupping-glass, and allowed to carry on the treatment at home.

Not all cases of tuberculous joints admit of the Bier treatment, and the following conditions are contra-indications to its use. Amyloid degeneration in the viscera, severe cases of pulmonary tuberculosis, cold abscesses filling the whole articular cavity. These last appear very seldom, and almost always in the knee joint. Then, again, in cases seen for the first time, where there is much deformity of the joint, and the latter is in a faulty position, Bier employs operation, removing the disease and the deformity at the same time, either by excision or by amputation.

A consideration of Professor Bier's statistics proves very interesting. The best results have been obtained in the elbow, wrist and ankle joints, and in the bones and joints of the hands and feet; and the worst, in the knee joint. In this last joint more excisions have been done than in any other joint, because of the occurrence of large abscesses and deformity, which necessitate excision. With reference to the hip joint, I may say that the artificial production of hyperæmia in this joint has been so difficult, and has proved so unsatisfactory, that Bier has discontinued it. Some-