like granulations could be observed. The inflammation extended along the tendens to the wrist and forearm, pus being formed in such quantities as completely to infiltrate all the textures in the neighbourhood of the wrist.

On the 16th, hemorrhage again took place suddenly from the palmar surface, as before, rendering it necessary to re-apply the pressure both to the hand itself and to the brachial. The compression easily arrested the bleeding for the time, but it was no sooner removed than the hemorrhage would recommence.

The hemorrhage was believed to proceed from the superficial palmar arch—from the fact that pressure on the ulnar artery almost completely arrested it. On this account it was contemplated to tie the ulnar artery at the wrist, but from the very diseased condition of all the parts it was considered doubtful whether the artery would bear the ligature.

From the frequent losses of blood, the patient's strength began to fail, and on the 20th he was ordered 4oz. of wine daily.

On the 21st, the hemorrhage commenced as usual on the removal of the dressings, and from the state of the parts the propriety of amputation was thought of, the patient himself being quite anxious to submit to it, rather than incur the risk of losing his life for the very doubtful chance of saving his limb. As there was, however, still some hope of arresting the hemorrhage, and the parts looking as if they might still heal, provided the bleeding was stopped, it was resolved to try compression once more. For this purpose, a piece of cerk was so cut, that by applying it to the wrist, it would press upon both the radial and ulnar arteries. This was applied to the wrist, slight pressure being continued to the brachial. A solution of chloride of lime was applied by means of wet cloths, and the hand left untouched for three days. At the same time, in addition to the 4oz. of wine, he was ordered a pint of beer daily.

On the 24th, a consultation was called. The patient's strength seemed very much reduced, his pulse was about 130, and weak. He was very anxious to have the hand taken off. On removing the dressings, all hopes of saving the limb were at once abandoned. It seemed no longer much inclined to bleed, but the parts were in such a diseased state, that the carpal bones were completely separated, and quite moveable, and the parts to which the pressure had been applied were in a sloughing condition. As the disease extended considerably above the wrist joint, it was decided to operate about four or five inches below the olbow. He was immediately removed to the operating room, placed under the influence of chloroform, and the amputation performed by the circular method. Scarcely an ounce of blood was lost in the operation, and notwithstanding the weakness of the patient, he seemed to bear it remarkably well. On examination of the amputated limb, nearly all the