tissues, connective, muscular and integumental." May this be the explanation of the numerous cases of talipes occurring with simple meningocele ?

3. Leakage may occur several days after operation, but may spontaneously cease; and if great care be exercised no sepsis may result, and the case may go on to complete recovery.

CASE I.—August, 1896. Lumbo-sacral meningocele ; aged 10 months; no complication; simple flap operation; recovery.

CASE II.—October, 1896. Third and fourth lumbar meningocele; aged 14 months; no complications; sutured off sac; skin flaps; recovery.

CASE III.—January, 1897. Lower lumbar region meningocele; aged 12 months; paraplegia, hydrocephalus; Morton's method had been used several times; child evidently cannot live; operation demanded by parents; child died after twenty-four hours.

CASE IV.—October, 1897. Fourth and fifth lumbar meningocele; aged 9 months; hydrocephalus; excision six days after aspiration; head reduced one-half inch in circumference two weeks after operation; leakage occurred twelve days after operation; wound again closed under pressure; symptoms of sepsis and death on the thirtieth day after operation.

CASE V.—November, 1897. Man aged 22; cervico-dorsal meningocele, very large; marked asymmetry of head and face; excision; recovery.

CASE VI.—March, 1898. Cervico-dorsal meningocele; boy, aged 11½ years. single club-foot; uninterrupted recovery.

CASE VII.—August, 1898. Lumbo-sacral; aged 5, found a lipoma covering large deficiency in the spinal column, with meningocele protruding. Removed lipoma and brought flaps over; leakage began on fifth day and continued for a week, when complete recovery took place. Had previously in this case successfully removed both astraguli for double club-foot, viz., T. equino-varus and T. calcaneo-valgus.

CASE VIII.—December, 1898. Lower lumbar meningo-myelocele; boy, aged 8 months; double T. equino-varus; tumor, 4½ x 5 inches. Skin transparent and giving way on surface; opened laterally after dissecting flaps and found numerous nerve filaments adherent to surface. Removed adherent ribbons of sac with the nerves attached and returned to canal. Closed wound with double line of sutures. Dressing removed on fifth day and found dry. Three days later some leakage, which ceased after a week; recovery. No paralysis. Talipes easily corrected by plaster-of-Paris; limbs weak; not well developed.