

## TORONTO GENERAL HOSPITAL.

DISEASE OF THE FOOT—AMPUTATION—UNDER THE CARE  
OF DR. AIKINS.

(Reported by R. B. Nevitt).

R. A., 38 years of age, entered the Toronto General Hospital on the 15th of August, suffering from disease of the left foot.

Last January, on the 15th of the month, he cut his foot with an axe with which he was cutting some wood, and the edge made an incision over the joint of the great toe, about one inch and a half in depth. At the time of the accident it did not bleed much, but began to bleed when he was walking home, a distance of about a mile. Three days after, it began to fester, poultices were applied and continued for about a month. In about two months the cut was healed. Several sinuses subsequently made their appearance on the dorsum of the foot, and also on the side and sole; these kept opening and closing, and the patient was much reduced from hectic fever. Dr. Oliver, of Petrolia, had him under his care for some time, and recommended him to come to the Hospital. He did so, and on the 15th of August he was placed under the care of Dr. Aikins.

He was put on the regular Hospital diet. His foot was extremely painful, red and inflamed, three or four sinuses existed, all of which pointed towards the metatarsal bone of the great toe, and most of them were connected with each other. Dead bone was detected by the probe. Poultices were applied, and the foot slightly elevated. Treatment was continued for some time, but with little effect.

September 19th—To-day Dr. Aikins operated upon the foot. The operation consisted in a slight modification of Chopart's. An incision was made from a point about half an inch anterior and inferior to the internal malleolus upwards and across the dorsum to a point directly opposite, and a second incision from the same point downwards and across forming the flap from the sole of the foot. The muscles were dissected back, and the head of the astragalus and anterior extremity of os-calcis sawn off. Having ascertained that there were no portions of diseased bone left, the flaps were brought together by fine iron wire sutures. The flaps being rather short, the tension was pretty strong, and a large number were required to