

origin is coeval with the enforcement of the edict dooming man to labor; and to no time, nor to any race, was exemption granted from the natural defects or weakness of structure incident to the development and growth of certain parts of the body. The frequency of it among us is well known. The nature of the occupations of the great mass of our people render them singularly liable to it, and there is not one of my hearers who has not had some experience and can contribute some information to the general discussion. I regret that, owing to the meagre nature of our vital statistics, I cannot give any exact figures. I searched the latest volume published by the Legislature of the Province containing the record of deaths and their causes, but did not even find the name mentioned. The American census of 1880 shows that of the total deaths, one in every 600 was due to it; and of 1236 deaths from it, 141 occurred in children under one year. Kingdon gives some statistics of its frequency in England; one in eight of all the inhabitants were affected with it; and in some districts, as high as one in five. He adds, 41 per cent. were under 31 years of age and 59 per cent. over it. These figures show how very frequent it is. I think all will admit that Canada could, in this respect, compete successfully with these countries.

The first point I shall notice is that of its anatomy. What could the examiners on surgical anatomy do without "the course and coverings of hernia,"—its canals, orifices, fasciæ, ligaments, triangles, vessels, relations, etc. It seems heretical to say a word against it, and if practically learned, my remarks would not apply; but when committed to memory from books, it acts as a powerful deterrent to operation; when that time arrives the details become jumbled together, engender doubt and indecision, instead of confidence and resource; delay results, and delay in many cases means death.

It ought to be impressed on the student that he will not see these, in order that he need not look for them; that skin, superficial fascia, and another membrane, being divided, will bring him to the sac. How astonished one is, after seeing his first operation of cutting down on the sac of, say, an inguinal hernia, at the difference between the ideal and the reality!

No one has done more in this Province to encourage the study of anatomy than I; but not from books. Experience tells me it cannot be too strongly impressed on the mind of the newly ordained, that they will never see these tissues in the order named; that no importance need be attached to them. The different varieties, with perhaps one exception, excite no recollection of special merit; one, however, demands a passing notice. I saw it first described in Birkett's very valuable article on hernia, in Holmes' surgery; and when I was examiner to the Ontario Medical Council, I gave a question on it more than once, without receiving, on any occasion, an intelligent answer. I allude to that form of inguinal hernia which occurs sometimes in young adults, and which is due to the non or partial closure of the tunica vaginalis. Sometimes it drops into what is called the funicular portion, and sometimes into the scrotal. Anyone who examines many cadavers will, if he look, be struck with the frequency of this incomplete closure. The differential diagnosis is given in few terms, namely: It occurs in young adults; its form is globular, compared with the pyriform shape of the acquired variety. Sometimes it has an hour-glass constriction. The testis may be felt or it may not. Practically, its recognition, as I have had reason to verify, is of great consequence. The reasons being, 1st, because the constitutional symptoms ensuing are more severe; 2nd, it is more easily strangulated; and 3rd, it requires prompt liberation, else a fatal termination may be dreaded. It is capable of radical cure much more certainly, and eludes the taxis more readily than any other form. Another reason which makes me bring it so prominently before you, and which I have not seen noticed anywhere, is its recognition in medico-legal cases. To illustrate: A man in Kingston a few years ago, while walking along the street one night, fell into an open drain; he fell on the edge of a plank, the whole force of the fall coming on the perinæum and inflicting a severe contused wound in that region. The wound healed well, leaving no evidence of permanent damage. Fortunately for the man, he discovered an inguinal hernia, and "was positive it was not there before, and was caused by the fall." He brought suit