

with in the neighbourhood of the hip joint recovered from morbus coxarius. Fibrous ankylosis is unquestionably the most common result of that disease, and we find it generally complicated with malposition of the thigh, arising from muscular contractions.

I have had repeated opportunities of thoroughly examining the anatomical status of joints thus changed. In the first place I have found the acetabulum enlarged in a posterior and superior direction, giving it almost the shape of a figure eight; the new accession being the smaller part. The cartilaginous covering of the acetabulum proper had almost entirely vanished, and upon the accessory portion none whatever could be detected. In some instances the femur was riding on the remnant of the acetabular margin separating the two articular segments, and for this purpose had a corresponding groove which gave it an accurate fit.

Of the femur, the head had been entirely lost in every single instance, and the neck more or less shortened.

The intra-articular fibrous adhesions fastened the end of the femur to the articular surface of the pelvis, permitting a slight degree of mobility. The capsular ligament was more or less comprised and identified with the intra-articular fibrous structure, and could only in one case, and to a slight extent, be separated therefrom.

In two instances fibrous bands obviously of a neoplastic character strengthened the connection of the femur with the pelvis. The osteophytes arose from the neighbourhood of the acetabulum, were short and thick, forming no organic connection with the femur and would have offered no impediment to the *brisement forcé*.

From this short sketch we may arrive at an approximate estimate of the prevailing anatomico-pathological conditions which *brisement forcé* has to contend with.

Buehring was the first who extended the usefulness of *brisement forcé* to the hip joint, and made strenuous efforts to correct the co-existing deformities. The means employed by him were, however, so defective that but imperfect results were attained. He already adverts to several cases of failure and disaster; in one he reproduced the original disease to which the little patient eventually fell a victim. And I have to place an instance on record, in which by a fall, *brisement forcé* was effected and subsequently followed by the return of the disease, terminating fatally. The case happened with a lad of Swedish extraction, about sixteen years of age. The original disease had taken its course through several years, terminating in fibrous ankylosis of the joint and malposition of the femur, when the patient was about ten years old. Aside from the existing impediment to locomotion, he had not been troubled for six years, when