

October 3, Dr. Fenwick stated, he purposed treating this case with absolute rest, and at the same time he should attend to the general health of the patient. In order to carry out these views, it would be necessary to divide the tendons of those muscles which from apparent irritability had become contracted, and which retained the limb in its present position. After having divided the tendons he purposed to place the limb on a long splint, with a pulley and weight attached. He thought that a weight of about 4 or 5 lbs would be sufficient. This was accordingly done. The patient being placed under chloroform, the tendons of the adductor longus and pectineus were divided subcutaneously, and the limb adjusted in a long splint with weight attached.

October 4.—Rested badly throughout the night; suffered much from pain and starting of muscles of limb.

October 5.—Passed a better night, limb still rather painful, but less so than yesterday; the bowels have acted, and the general symptoms are satisfactory. Takes nourishment well.

October 12.—The patient is slightly feverish, the skin hot and dry—tongue coated with a yellowish fur, and feels depressed. Bowels had not acted for two days. An aperient draught was ordered, and the following mixture: chlorate of potash, nitrate of potash; of each 3 i; water, $\frac{5}{8}$ viii; a table-spoonful every three hours. This mixture was continued for two days, when the symptoms above indicated subsided. The case progressed favourably from this time up to the 5th November, when the boy had a slight attack of cold, with sore throat, which readily yielded to a diaphoretic mixture and gargle. The position of the limb is now natural, he lies straight in bed, and there is no apparent difference in the length of the limbs. The treatment by extension was faithfully maintained up to the 18th November, when the splint and bandages were removed. On examining the limb the joint was found stiff but did not give much uneasiness on gentle motion.

November 19.—Dr. Fenwick ordered the limb to be put up in a starched bandage, with pasteboard splint; this was done so that the boy could leave his bed and enjoy exercise. A pasteboard splint was moulded to the body, and extended over the front of the thigh, from the crest of the ilium to the knee. This was applied with a starched bandage. By this means all motion of the affected joint was prevented. The following day he left his bed and sat in a chair. Does not complain of pain; from this date he walked about the ward on crutches, his general health has much improved. He appears cheerful and is getting fat.

December 16.—The starch bandage was removed, and the limb examined. The patient expressed himself as feeling comfortable; he can lean