

splint the thigh. The fracture-box is the ideal first dressing in all compound fractures of foot or leg. Fracture of head of tibia or fibula may have Hodgen's splint. We should not forget that fractures of the upper end of tibia, even when the joint is not involved, require twice the length of time that the lower end needs. This bone is quite often fractured in wrestling where torsion is the force applied. A complication may occur in fractures of tibia; the complication is the trauma to the vessels. Where the lower end of fragment is displaced downward and backwards, etc., we may resort to tenotomy of the tendo Achilles. Pott's fracture, produced by eversion and outward rotation of the foot, is the triple fracture. The lines of fracture may be at internal malleolus, the fibula two inches above its lower end or through a part of the articular surface of the tibia. The diagnosis is made out by the prominence of the internal malleolus and the extreme eversion of the foot. For treatment, extension of foot, and it may be, the placing of the limb and foot in a fracture-box until swelling has been reduced, then apply plaster-of-Paris splint from toes to the knee joints. Fractures of all parts of fibula—apply plaster-of-Paris. Nature puts the other splint on in the form of the tibia. In fractures of the bones of the foot, when compound, if they cannot be replaced, remove fragments. Place the foot at right angle to the leg and apply plaster-of-Paris. The results are generally good. When the fracture is through the neck of the astragalus, the foot is placed so as to make an obtuse angle of foot and leg and retained. When the other bones of foot are fractured manipulate the parts into position and retain them with plaster-of-Paris dressing. Have not taken up all methods of treatment, among the most important left out being the ambulatory treatment.

THE SURGICAL TREATMENT OF THE INSANE IN PRIVATE PRACTICE.—NO. 2.

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In the DOMINION MEDICAL MONTHLY of January, of this year, I reported the pelvic examination of twenty-three female patients, with a statement of the conditions found in each examination. I also reported the operative treatment of twelve of these that were submitted to surgical measures, with the result of three being cured, four improved, and five unimproved. I herewith