

is with a view of showing what can be done in the wards of an hospital, and in private practice, in restoring to their functions, limbs considered useless, by means within the reach of the general surgeon, that the following cases are detailed. And I would here remark, that the instruments and means used by me were extremely simple, and that in their employment I do not lay claim to a greater amount of mechanical skill, than falls to the share of most practitioners who are acquainted with the anatomy and pathology of the parts engaged, and who have clear notions of what is expected from treatment. I need not remark that the present observations apply to those cases in which the ankylosis depends upon fibrous and fibro-cartilaginous bands, and alterations in structure of the normal constituents of the joints, and not to true bony union,—though until a recent period, the patient was, in both forms of the disease, allowed to pass through life with a useless limb, or rid himself of the incumbrance by submitting to its amputation.

It is true, that the treatment requires much patience, care, and management; that we are sometimes disappointed when we most expected success, and successful where we had but little hope of proving serviceable; in some cases, the improvement is slow, in others, surprisingly quick; and this uncertainty will attend our practice so long as the actual pathological condition of the joint, and its surrounding structure is enveloped in so much obscurity, for I believe it accords with the experience of most surgeons that we cannot always state, in cases of long standing, presented to us for the first time, whether the greater amount of disease is to be found on the articulating surfaces or in the enveloping structures. The duration of treatment will also depend upon the actual stage of the disease; if inflammation be still active, of course we cannot proceed as rapidly as when it has disappeared, or should it be awakened by our treatment, we shall require more time than if it did not present itself at all. The willingness or disinclination of the patient to assist us, will also exercise an important influence on the success of the treatment adopted, and the co-operation of the patients relatives, in the case of young children is almost indispensable. As most of the points now alluded to will be illustrated by the following cases, I shall not occupy more time by dilating upon them.

CASE I.—*Contraction of Knee Joint—Rapid Extension—Treatment successful.*

A man aged 23, of slender make and delicate appearance, was admitted under my care into St. Patrick's Hospital, March, 1853. The right leg was bent at an acute angle upon the thigh, the result of chronic dis-