

and wasting of the limb, and by the circumstance of the thigh being bent forward, and incapable of extension; the whole accompanied with general excitement in the system. The abscess comes out through the vastus externus as in the middle and inside of the thigh. The case is then desperate. When the disease is seated in the knee, the pain never comes on in less than four or five weeks, and often several months from the commencement of the disease. It is also sometimes attended with an accumulation of fluid in the joint.

Rest, caustic issues, setons and blisters are beneficial, but not mercurial alteratives. Plasters of ammoniac and other embrocations are inefficacious. Frictions injurious. Ulceration may take place without suppuration. The applications are to be made as near the joint as possible. Instead of beans the author prefers a solution of potash or vitriol for keeping up the discharge. It sometimes happens that after the issues have done good, the disease is increased or renewed by their continuance. In cases of abscess, the consequence of the ulceration, emetics, electricity, pressure or an early puncture have not proved serviceable. After it has become necessary to open the abscesses, the limb is to be wrapped up in a flannel wrung out of hot water, as long as the discharge continues to flow. When the cure takes place in an advanced stage, the limb will remain ankylosed.

We now come to the Vth chapter, *on a scrophulous disease of the joints having its origin in the cancellous structure of the bones.* It attacks the spongy texture of bones which become very vascular and contain a less than usual quantity of earthy matter; while at first, a transparent fluid, and afterwards a yellow cheesy substance is deposited in its cancelli.

It occurs in children and at the hip or shoulder joint. The swelling is puffy, elastic and firm, and increased after exercise. The skin assumes a dark red or purple colour, the abscess is slow, but when it bursts it discharges a thin pus, with portions of curdly substance floating in it. The discharge at length becomes thicker and cheesy, such as in scrophulous absorbent glands, and by means of a probe the bone is felt carious. The pain is not adequate to the extent of the mischief.

Local bleeding is useless. Cold evaporating lotions may have some good effect, but rest is the best remedy, and poultices when suppuration has begun, and the cure will be ef-