millionaire; he spurned hundreds of thousands of dollars offered him by others and showed them that there *are* men in this world who can't be bought.

Anyone who reflects for a momet on his subsequent liberality, must see that he came here with charity in his heart and a genuine feeling of good-will toward men.

After operating on little Miss Armour, instead of seeking other wealthy patients who were clamouring for his services, he threw open the door of his generous heart and invited the poor maimed of the city to come to him, 'without money and without price.' No less than two thousand answered his call, and hundreds were sent away cured. But, his generosity was not limited to Chicago, he travelled the length and breadth of the United States, carrying good cheer and gladness to thousands of poor cripples, who look up to him now with tears of gratitude in their eyes and a prayer of thanksgiving on their lips. With the utmost unselfishness and painstaking care he sought to teach the surgeons, who daily crowded the amphitheatre, his methods of operating so that they might carry on the good work when he was gone; this was done without even a thought of remuneration, so that mankind at large might be benefited.

Then let all medical men and all good citizens join in wishing Prof. Lorenz a long and prosperous life with health and strength to continue his noble work!

As far as can be gleaned from writings, the following is a description of the operation:

While the child is held by assistants, the operator grasps the deformed limb by the ankle, first extending and making traction downwards, thus bringing the head of the femur approximately opposite the acetabulum; the limb is then rotated, and by deep massage and manipulation the contracture of the muscle is overcome; using the hand as a wedge, the limb is then forcibly abducted until the abductor muscles disappear and these muscles are ruptured subcutaneously by manual effort. Rectangular flexion of the thigh is now done, and by strong abduction, the head of the femur is forced to slip over the posterior brim of the acetabulum, into which it settles with a snap. With the object of driving the head of the femur still further into the socket, the anterior portion of the capsular ligament is stretched by abduction and manipulation, the contraction of the flexor muscles being overcome by extension. The limb is then put up in plaster of Paris in a state of abduction, almost at right angles to the body, while the knee remains flexed. In a couple of weeks an extension shoe is placed on the foot and the child encouraged to place the weight of the body on this limb so as to further hollow out the acetabulum. The limb is kept in plaster of Paris for six months.

The following letter of advice to young doctors was written for the JOURNAL by Dr. John H. Girdner, author of "Newyorkitis."

"After twenty-five years' experience, I have come to divide doctors into three classes: First, those who are competent but dishonest; second, those who are honest but incompetent; and third,