

operation, it is to be observed that she had symptoms for a few days very suspicious of commencing peritonitis—a fact which shows the necessity for great caution in the performance of operations upon the unaltered mucous membrane of the rectum.—*Medical Times and Gazette.*

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*Nussbaum on the Treatment of Ununited Fracture by Transplantation of Bone.*

In the *Aerztliches Inteligenz-Blatt*, Feb. 23, 1875, Professor Nussbaum, of Munich, publishes a very interesting and practical clinical lecture on the treatment of ununited fracture, its pathology and methods of treatment, and particularly on the treatment by the transplantation of bone, in complicated gunshot fractures, resulting in an open false joint, with great loss of bone-substance and necrosis, where the cartilage encrusted extremities are merely bound together by a long thin tendinous band. As regards the limbs, he confesses that he has had only hitherto one instance in which he has employed the method, but with such a singular amount of success as to afford great encouragement to further attempts in the same direction.

A Saxon lieutenant, twenty-four years old, on July 22, 1870, in the fight at Mars-la-Tour, received a very severe gunshot wound in the right forearm. The ulna was smashed in the middle, the splinters of bone had necrosed, the periosteum had been destroyed, and subsequent cicatrization had resulted in a false joint, having about two inches and a half of open wound. The two approximating ends of the fractured bone were united by means of a thin fibrous cord. Although the radius was intact, the functions of the bone were so limited, and its abnormal motion so exaggerated, that the patient was invalided. On July 14, 1874, the patient being chloroformed, the false joint was exposed. Both ends of the fractured bone were thin, covered with a pointed cartilaginous process, and slightly united by means of a weak, tendinous false ligament. The pointed car-