in future cases of this description, the following plan was eventually decided upon. Six clear months were allowed to clapse after the month in which the man was discharged from hospital. In the month following these six clear months an enquiry was sent out to the medical officer of the unit to which the man belonged before admission to hospital, asking for an examination and a report on the condition of the hernia.

For example, suppose a man was operated upon in April and discharged from hospital in May, six clear months were allowed to clapse, and the enquiry was sent out in the following December. As a matter of fact, in a large number nine clear months intervened between the discharge of the patient and the sending out of the notice. It will be seen that the earliest possible time that the patient could be examined would be over seven months after the operation, and it might be as long as cleven months. Nine months may be taken as the average time. I most thoroughly realise that this time is very short and that the results cannot be regarded as the ultimate results; but the same would be true if the enquiries had been sent out a few months later. We have seen (see p. 19) that it is pretty generally agreed that, if a hernia does recur after operation, the relapse usually occurs in the course of a few months, and that from 85-90 per cent, of recurrences appear in the course of the first twelve months. I am inclined to think that, with such a severe test as that to which these men were subjected, the relapse, should it occur, would be still more likely to appear in the early months. At any rate, such a record should enable one to form some idea of the probable ultimate results, and, what was of great importance at the time, give one an idea as to whether it was worth continuing with this particular operation in these cases.

To roughly one-third of the enquiries sent out no reply was received; in roughly another third a reply was received to the effect that the man could not be traced; in some of these the man had not rejoined the same unit, in others he had been transferred to some other unit and had been lost sight of; in others, again, the man had afterwards been again sent to hospital with trench fever, nephritis or some other illness. In the remaining third the men were definitely traced, and a report