

skin directly in the middle line and passed down to the ligaments in a plane perpendicular to the surface. Then the proximal end of the needle was depressed to allow for the "shingling" of the vertebrallaminae and the needle pushed slowly inward and upward to the depth of three inches from the surface. No cerebro-spinal fluid appeared. An aspiration syringe gave no result save a drop or two of blood. The needle was then forced in more deeply still, and a free hæmorrhage through it at once became manifest. Repeated aspiration simply filled and refilled the syringe with pure blood. The needle was slightly withdrawn and its point directed from side to side, and still a negative result. Finally the needle was altogether removed. A second time the spinal landmarks were verified and the needle plunged in and more deeply than before. Aspiration here gave no result. The needle being a short distance withdrawn, free bleeding again occurred. Aspiration showed at first pure blood but afterward a few drops of clear fluid showed in the barrel of the syringe. Jonnesco was satisfied with this, and the cubic centimetre of the drugs was slowly injected. A gauze pad was placed over the punctures and held in position by simple strapping. The patient sat upright for one minute and then was placed in a semi-recumbent position, the head and shoulders being slightly elevated. The field of operation was sterilised, and ten minutes from the time of the injection, the patient was blindfolded, an assistant designated to watch respiration and pulse, and the operation began. Gerster operated. A racquet-shaped incision through the skin with extirpation of the whole gland and accidental button-holing of the external flap developed in rapid succession. The man struggled and complained bitterly from the first—kept iterating "I can't stand it, Doctor, I can't stand it. Give me ether; for God's sake. give me ether." Encouraged by the surgeon to bear it and be a good boy, the ejaculations were suppressed only to break forth anew as the sutures were being passed, and so the operation concluded. The patient was at once propped up in a semi-erect position his pulse and respiration were pronounced unaltered, but the face bore all the evidence of suffering and shock. Jonnesco, when asked pronounced the case a fair success, to which remark from an upper seat came the sharp rejoinder: "Well, I don't," and pointing to the patient, "Ask him." Gerster asked and got as answer, "I felt every cut you made, Doctor, but one," and a second onlooker observed, "I wonder which one."

Case II. A youth of 18, less robust and of a more nervous type than Case I. Right inguinal hernia. This was a case for the lower dorso-lumbar puncture. The injection fluid was made as before,