I beg, therefore, to submit the enclosed case to you; should you think favourably of this my first attempt, I will feel encouraged to trouble you with another.

I have the honour to be, yours very respectfully,

J. J. N.

G. Waters, a seaman, aged 16, was admitted into the Marine Hospital June 29, 1844. He stated that thirty-eight days previously he had fallen from the rigging, and broken his shoulder. mination, the left humerus was discovered to be fractured a little below its neck. The lower portion protruded about two inches through the integument, in front of the middle of the clavicle The upper portion of the fractured bone was thrust backward The whole of the integument and anterior deltoid were interposed between the fractured ends of the bone. The arm was much short ened: the muscles had accommodated themselves to this shortening and the adhesions were so firm that it was found impracticable While at sea, escharotics had been freely reduce the fracture. applied to the projecting bone, which was carious. It was consi dered that, even if the projecting portion were removed, the interposed soft parts would prevent the fractured ends being placed in apposition.

Under these circumstances, it was deemed necessary to remond both ends of the bone, to bring them in contact. On the 2dd July the following operation was performed, being the third by after his admission.

An incision was made from where the bone transfixed the integument; this incision was continued to the insertion of the deltoid Another incision, commencing at the posterior border of the deltoid was brought down till it joined the first one. The flap thus formed was dissected up, exposing completely the fracture and the shoulder joint. Two arteries requiring ligature were tied. The lower portion of bone was then sawn off abouthalf an inch below where it had pretruded. The upper portion was very short, and deeply imbedded in the soft parts. A projecting and oblique portion, about an inch is length, was removed by means of cutting forceps—parallel to the insertion of the capsule.

The ends of the bone were then easily brought together. The flap was laid down, and secured by three or four stitches, and evered by a pledget of lint wetted with cold water. The arm was