out and with forceps and scissors the wound itself was freed from tubercular material. The incision was then sutured and a lateral Mason splint applied. Result: The arm has entirely regained its normal motion, and in spite of the unusual amount of bone removed the result is all that could be desired—the patient being again able to use it freely.

## TREPHINING FOR EPILEPSY.

The patient, Geo. H-, was admitted May 1807 to the Hospital suffering from epilepsy. He gave a history of having been thrown out of a rig about a year before and alighting on his head. The epileptic seizures while in the Hospital were severe and frequent. The only evidence of any injury to head was a slight scar on right side of scalp and about half an inch from the sagutal suture near the lambda. The patient was willing to undergo an operation as his life was becoming a burden to him, and as there was nothing in the nature of the epileptic seizure to localize any injury, it was deemed advisable to trephine over the scar above referred to. On May 15th, under choloform narcosis, I made the usual horse-shoe shaped incision so as to expose the above point. On reflecting the flap back there was no fissure or other injury to the bone visible. The trephine was applied and a button removed and this also was apparently normal. The dura was incised and neither it nor the cerebral cortex showed anything abnormal. The wound was sutured and united in the usual time. The results of operative interference for epilepsy have not been brilliant, and so I was pleased to receive a card from the patient last month in which he states that he frequently has mild spells but has had none of the severe attacks since the operation.

## DEFORMITY FROM A BURN.

The patient, M. T—, aet II, was admitted under my care May 1897. Three years previously she had been severely burned, her clothes catching fire from a stove and the whole anterior aspect of left arm was burnt. Sloughing occurred and the resulting contraction flexed the forearm to such an extent that the hand lay across the chest and pointed to the opposite shoulder. Operation June 1897 the skin, on flexor aspect of forearm was dissected up, starting from about two inches above wrist and end-