

the transversalis fascia forming a new internal ring at the same time obliterates the hernial infundibuliform process. (3) Sewing the internal oblique and transversalis muscles to Poupart's ligament secures a normal origin for them and they can find perfect protection to the internal ring cord and canal. (4) The suturing of the separated fibres of the aponeurosis of the external oblique protects the underlying muscles and cord, while the skin flap covers all.

II. The four lines of suture are not opposite each other thus securing an overlapping of the weak parts (lines of repair) by normal tissues.

III. The semi-lunar incision has great advantages. (1) The hernial area is uncovered as in no other way, thus affording an accurate observation of structural relationship, etiologic factors and pathologic conditions. (2) There is less tendency of skin infection, extending to the deeper structures. (3) Should, unhappily, a return of the rupture occur, there is no scar over it and a truss can be better borne.

IV. Of all the operations that I have performed, it is the simplest and easiest to execute. There is a good scientific reason furnished for every step in the operation.

V. Results are excellent. The eighteen months I have performed my 'Typical Operation' 64 times, counting each case of double hernia as two operations. There have been no relapses so far. I do not wish to say that recurrence cannot take place. The ages of my patients varied from 5 to 76 years; station in life, from poorhouse cases to the most affluent. Seven hernias in four men were complicated with enlarged prostate, where at the same time I performed gonangiomy; 4 were strangulated; 1 (double) had chronic gonorrhoea; 3 cases had non-descending testicle; 4 had varicocèle; 2 had a femoral and umbilical hernia; 1 case had an epigastric and a femoral hernia as well, all three operated at the same time; and 1 had oblique inguinal congenital, and on the same side an acquired direct hernia.

There was one death on the fourth day after the operation—an old man, 74 years old. He had enlarged prostate chronic cystitis, diseased kidneys, etc., etc. The effect of the anæsthetic was most likely the cause of death. Three cases suppurated. Two had chronic gonorrhoea and the third had chronic cystitis.