

and the nerve sought for, along the upper margin of this muscle, about opposite to the middle of the mastoid process, and, when found, traction as high as four or five pounds may be employed for the purpose of stretching the nerve. The *spinal accessory* is stretched for the relief of spasmodic torticollis through an incision starting at the tip of the mastoid and extending for about three inches along the anterior border of the sterno-mastoid. On the exposure of this muscle it is drawn forcibly backwards, and the prominent transverse process of the atlas having been identified, the nerve is sought for, as it crosses this process to enter the deep surface of the muscle about one and a half inches below the tip of the mastoid. This nerve may be stretched, as it leaves the posterior border of the sterno-mastoid to cross the posterior triangle, but in this situation, the action of the trapezius alone would be affected, and hence, the operation near the mastoid is preferable. The *brachial plexus* in the neck may be exposed through an incision, which, starting about half an inch above the centre of the clavicle, extends upwards for about three inches. After dividing the integument, fascia and platysma and drawing the external jugular out of the way, the deep fascia is incised, the omo-hyoid drawn downwards, and the plexus exposed with the transversalis colli artery and vein crossing it about its middle. On drawing these aside any particular cord of the plexus may be stretched.

*Phlebotomy.*—When the *external jugular* is selected, the incision should be made only partly through the vein, *i.e.*, the vessel should not be completely severed, since the flow of blood is freer when the partial incision is employed. Another point in connection with bleeding from this vessel is that the incision should be transverse to the direction of the fibres of the platysma, so that, when