

been dressed at the field ambulance, had been sent on to Athens, where he arrived May 7th, five days after the battle. The wound of entrance, on the anterior aspect of the limb, was three inches below the inguinal arch, and directly over the femoral artery, and the wound of exit was on the external aspect of the limb. The femur was seen to be fractured. The temperature was normal. The wounds were dressed, and a fracture apparatus applied. Next day, however, May 9th, seventh day, the axillary temperature rose to  $101\frac{2}{3}$  in the morning and  $102\frac{2}{3}$  in the evening. The general condition indicated great danger. On May 10th the patient having been anaesthetized, the surgeon enlarged the wound of entrance, and discovered a pocket filled with fibrinous detritus and clots of pus. These having been cleaned out, he found quite a number of splinters of broken bone, which he removed with forceps and fingers. The seat of the fracture was washed, and it was then observed that the femoral vessels had been completely cut through and obliterated, the upper part of the artery beating strongly at the superior border of the wound. No pulse could be found in the posterior tibial and dorsalis pedis arteries; but the limb presented no alteration. A catgut ligature was cast around the upper end of the obliterated artery, and the seat of the fracture was left open, being simply stuffed with iodoform gauze. On the next day the patient's temperature was  $99\frac{5}{10}$  in the morning and  $100\frac{2}{3}$  in the evening. On the 12th and 13th of May, the second and third days after the operation, the patient's condition became alarming. He moaned continually, his face got a drawn look, the temperature rose ( $101\frac{3}{5}$ ,  $102\frac{2}{5}$  a.m.,  $103\frac{1}{5}$ ,  $104$  p.m.), his tongue became dry and diarrhoea began. After a while the wound appeared to secrete a liquid substance, but there was no hemorrhage. Subcutaneous injections of artificial serum were given. The temperature then fell to  $102\frac{2}{5}$  and on the next day, after the wound was dressed, to  $99$  a.m. and  $102\frac{2}{5}$  p.m., and afterwards the fever abated completely. The wound became clean and healed, the expression of the patient improved, the diarrhoea ceased, and everything betokened a happy termination.

This case is interesting in two ways. The operation revealed an unexpected lesion—the wounding of the femoral vessels—and yet the cutting of these vessels had not caused hemorrhage or any circulatory troubles in the limb. Then again, looked at from the standpoint of surgical treatment, here was a comminuted frac-