

is so often deposited around the sac and cord and along Poupart's ligament that are etiologic factors in hernia, and if not removed tends to cause a return of the hernia. A systematic search should be made for fatty aggregations and remove them. (See "Adipose Tissue an Etiologic Factor Hernia," May, 1899, Illinois State Med. Soc., by the author.)

FOURTH STEP. *Restore the structures to their normal positions.*

Transversalis Fascia. It forms the internal ring. In hernia its fibres have become more or less stretched above and around the cord. The ring in consequence is abnormally large and the fascia bulges outwards. To rectify this condition take up the slack in the fascia and make an accurately fitting ring for the cord by means of a suture interrupted or continuous. Do not injure the deep epigastric vessels, nor pass the needle too deeply in the direction of the large iliac vessels.

Internal Abdominal Oblique and Transversalis Muscles. Suture these muscles to the internal aspect of Poupart's ligament, and restore their normal origin. I usually freshen the lower border of the muscles and scarify the surface of Poupart's ligament to insure firm union, and extend the sewing fully two-thirds down Poupart's ligament, which is the normal origin of this muscle in the female. Take care not to split Poupart's ligament by grasping with the needle the same longitudinal fibres each time. It is surprising how easily these two structures come together without the least discernible tension, and it is gratifying to observe how perfectly these muscles cover and protect the internal abdominal ring and inguinal canal.

Aponeurosis of the External Oblique Muscle. Bring together the separated edges of the aponeurosis of this muscle. Restore the external abdominal ring.

Flap. In bringing the skin flap into a normal position be sure and coapt all its structures, like to like, especially the deep layer of the superficial fascia.

COMMENDABLE FEATURES.

I. The different structures in the abdominal wall are placed in their normal relationship. (1) The tying of the sac restores the normal rotundity of the peritoneum. (2) The suturing of