

show what can be done with this blocking method. That the technique must be accurate goes without saying.

I want to mention another method of blocking recently introduced by Bier by which a whole extremity is rendered insensitive en masse. This is done by exposing a vein under infiltration anaesthesia in the case of a lower extremity, the internal saphenous, and a canula inserted. Now the thigh is constricted just above the canula and again a short distance below by a tourniquet just tight enough to interrupt all circulation and 30cc of a 1 p.c. Novocain solution injected into the vein.

The ramifications of the vein distributes the anaesthetic to all parts of the cross section of the thigh included between the tourniquets and thus a complete blocking of all nerves is produced. 15 minutes after the injection the whole extremity below the constriction is absolutely anaesthetic. Extensive osteotomies, excision of the knee or amputation or any other operation can be done without a vestige of pain. The toxicity of Novocain is destroyed by the blood and tissues fluids before the bands are removed. At first Beir washed out the Novocain with normal Saline but this was found unnecessary. Neither in the hands of Beir nor in any of my cases have any bad results followed; on the contrary the method has been extremely satisfactory. No cases are reported as the method is quite new.

In conclusion, I may say that in my experience with local anaesthesia, including as it does many hospital as well as private cases, I have always found it most satisfactory as soon as my technique was correct.