the marginal wall of the acetabulum. Powerful abduction under these circumstances causes the dislocation, and operates upon the extended limb as upon a lever, while the trochanter major, resting upon the bones of the pelvis first, and secondly, the neck of the femur operating upon the edge of the cotyloid cavity as upon a fulcrum, serve to direct the head of the bone in its abnormal course; the force being continued at an angle less than when the head of the bone was forced into the thyroid hole, it is thrust in upon the os pubis, and lodged under the psoas magnus, and iliacus internus muscles-pushing up the tendons of these muscles under Poupart's ligament, so as to interfere with the spermatic passage. This accident may happen when a man walking forward, unexpectedly puts his foot into a deep hole; this reaches the ground at a much greater depth than was anticipated—the thigh continuing in the perpendicular, the body is suddenly thrown backwards in the effort to recover the true position, but failing to relieve or retract the leg, which is, perhaps, stationaryfixed in a hole—the patient, twisting his body, falls upon his side, powerfully abducting the limb from its fellow; now the head of the femur resting upon the weakest point in the capsular ligament, and most imperfect portion of the cotyloid cavity, this yields to the impulse. In this position the weight of the body suddenly comes upon these parts, lacerates the ligament, dislocates the head of the thigh bone, and places it upon the crest of the pubis.

The symptoms presenting themselves upon our examination of the patient while laboring under this variety of displacement, are, that the limb may be somewhat shorter than its fellow; this, however, is not so extreme as in some varieties of fracture of the neck of the thigh bone, with which it is said this dislocation may sometimes be confounded; indeed, from the position of the head of the bone, resting upon the pubis, it generally lies in a plane scarcely in any degree elevated above the acetabulum—so that this shortening of the limb is difficult to be demonstrated in many cases. The limb is always flexed upon the body, abducted from its fellow, and the toe is rotated outwards; the head of the thigh bone may be plainly felt, and even seen moving in the groin, upon the least attempt to rotate the limb; it may be observed lying external to the femoral

vessels and nerves.

The action of the muscles upon the femur, although si-

milar in direction in this variety of accident, must be some what different from the influence they exert when the headel the bone is placed in the thyroid hole; in this instance, the