the splint Three short splints were applied to the thigh, one in front, one behind, and one at the inner side. When the whole was adjusted it was found that the limb, compared with its fellow, was in a natural position. The following day found the man comfortable and the limb in good condition. Subsequently, in consequence of excoriation at the perinæum, a pully and weight at the foot was substituted for perineal bandage. The foot of the bed was raised to the extent of eight inches, and the upper end of the long splint was attached to the body by bandage. No untoward symptom presented itself, and at the end of six weeks the splints were removed. Provisional callus upon the posterior aspect of the bone was found to be abundant, but the limb was natural in its general appearance. A starch bandage was applied and the patient removed to his home. He has been seen since that time, and now, on the 20th of March he is able to get about on crutches. The limb is looking well.

The fracture of the fibula did not require much attention. By pressure behind, the fragments were brought into place, and the leg was made comfortable by an elevated position.

CASE OF FRACTURE OF THE NECK OF THE FEMUR—INTRA-CAPSULAR.

Peter R., aged 67, native of Ireland, admitted 10th of Feb. 1871. A feeble bodied man met with an accident a fortnight before admission, by falling heavily upon the ground striking upon the nates The perinæum was much bruised and diffused inflammation followed Abscesses formed and discharge continues. He was entirely helpless, not being able to move the left leg. Upon examination, the principal deformity was found to consist in shortening of the limb to the extent of an inch and a half. Crepitus could be felt upon flexing the thigh. The limb was placed in a comfortable position on the double inclined plane. A few days after it was noticed that the limb had become shortened to the extent of three inches, and that the trochanter major was prominent and much higher up than natural. A pully and weight was attached to the limb, but the patient was unable to bear the confinement. The limb was then placed in a McIntyre splint and made fast This degree of confinement the patient has been able to endure.

It is no uncommon thing for the shortening, which is limited at first, in intra-capsular fracture to become greater from the stretching of the capsular ligament. Of course when the fracture is completely within the ligament, the hope of ossific union must be limited, but in this case it is hoped that the tracture is oblique and that a portion of the upper fragment is attached to the capsular ligament so as to obtain a better arterial supply.