

which they have often proved to the unfortunate patients themselves, and from other causes, were, not a very few years ago, treated heroically by amputation of the limbs, either above or below the knee; it has been my lot to have, I may say frequently, witnessed such operations for cure, and alas, sometimes followed by a very different result than has been hopefully anticipated. Fortunately, conservative surgery is now constantly stepping in to prevent such hazardous means of treatment, and hardly a day passes but we witness instances which, but for it, might have been sorry examples of our noble art. The following operations which I witnessed at King's College Hospital, on 24th June, furnish most excellent examples of the improvements made in modern surgery, so essentially conservative in its character, and so much more satisfactory in its results to both the Surgeon and the poor patient.

An elderly man was brought into the theatre with his right leg bandaged up, which, on being unloosened, was found to be somewhat enlarged over its anterior and middle aspects, and irregular on its surface along the course of the tibia. The skin was red and shining, and presented openings communicating with denuded and dead bone. Mr. Fergusson stated this case to be one of the illustrations of the effects of chronic inflammation of bone, followed by necrosis of superficial parts of it, requiring operative interference to remove the dead portions from the living. He accordingly made an incision through the thickened and indurated skin, to the extent of several inches along the anterior portion of the tibia, about a couple of inches below the knee, cutting down to the bone itself. With his finger only he loosened the connection between the skin and the bone on either side of his incision, and with the aid of a small pair of Liston's forceps, but with the cutting portion bent in a curved form, with the convexity towards the bone, he cut away and removed all the portions of necrosed bone which he could find. He used the gouge in two or three spots of the tibia where the necrosis occupied concavities in its surface. A good deal of hemorrhage followed the incision when first made, but it ceased completely after, so that the operation itself was not interfered with. Among the portions of bone removed, were fragments with healthy and dead bone mixed, with new and dead bone, and of purely necrosed bone. A bandage was loosely put round the leg, and the patient removed. Mr. Fergusson, in his observations upon the case, remarked, that as the sources of irritation were now removed, he had no doubt whatever that the sores would heal up, and the patient be free from further annoyance.

A female, aged about 24 years, healthy-looking, whose left fore arm bore evidence of long standing scrofulous disease of the bones, both from the marks of healed up sores and existing sinuses, was next brought