

scapula, and the extremities of the acromion and coracoid processes. As the forceps did not answer for all parts of the operation, the gouge was freely applied until a healthy bony surface was exposed throughout. During the operation, which was necessarily more protracted than was anticipated, he lost a good deal of venous blood, and the proceedings had to be stopped three or four times until he regained sufficient strength to enable me to continue. The greatest care was also bestowed upon the administration of the chloroform. Notwithstanding the size of the wound, and the vascularity of the integuments, there was only one small artery cut (the anterior circumflex), and this did not require a ligature. The edges of the wound were brought together with difficulty, for in order to keep down the upper flap, I was obliged to use hare-lip pins, so great a tendency did it exhibit to retract upward over the point of the shoulder.

Water dressing was applied to the wound, an anodyne administered, and nutritious diet prescribed.

The following morning he was in good spirits, and stated that he had passed a quieter night than he had done for several months past. He suffered no pain in the shoulder, and was quite free from fever.

It is unnecessary to detail the daily changes that took place in the wound. I may mention that I took no precaution about keeping the limb raised, or in a fixed position; in fact, I neglected much of the advice given on this point in surgical books, as I believe a good deal of it is suggested by theory, and not by practice. I allowed the patient to please himself on this point; and I had no reason to regret leaving him to manage matters for himself, for, on the sixth day after the operation, he was walking about the ward, and could move the elbow from the side to a distance of about eight inches, and the scapula could be elevated, carrying with it the arm, without any increase of pain; and, at the termination of the fourth week, he was able to hold a vessel in the hand of the affected limb, to receive the fluid of an abdominal dropsy I had tapped, and steadily continued at this task until the last drops of the fluid were drawn off. I mention this circumstance, as showing what power the limb had acquired, for the test is one, which even a strong person, with perfect use of the arm and shoulder, would feel tiresome, and difficult to sustain.

He remained in the hospital for some weeks longer, during which period all the sinuses closed but one. His health became much improved, and he left with the intention of earning his livelihood as a pedler. He frequently called at my house during the autumn, and, on each occasion, an increase of power of the limb was remarked.