

at Poupart's ligament, transversalis fascia, and the internal surface of Poupart's ligament. I consider the *congenital deficient origin of the internal oblique* and transversalis muscles one of the most frequent and important causes of oblique inguinal hernia. Inspect these structures carefully, and now determine whether the operation is to be typical or atypical. When the structures are well defined and not too much weakened by pressure atrophy, a typical operation can be proceeded with.

**THIRD STEP.** *This step deals with the sac and its contents; the cord, cremasteric muscle, and subserous lipomata.*

**Sac.** The sac is carefully dissected from the cord and internal ring; it is always opened, contents inspected and dealt with, and ligated high up over the inserted finger, cut off, and the stump dropped. In atypical operations the sac is usually preserved, as recommended by Macewen. If the sac be congenital, divide it in two, the distal half to form a tunic for testicle, and the proximal to be treated as above mentioned.

**Omentum.** When omentum is found within the sac it is liberally withdrawn, tied *en masse*, cut off, stump covered with its own peritoneum, and returned within the abdomen. This decreases the intra-abdominal pressure and lessens the tendency to a return of the hernia. At the stage of the operation when the sac is opened, it is frequently found advantageous to place the patient in the Trendelenburg position to prevent protrusion of and injury to the intestines.

**Cord.** The cord is not disturbed. I have never been satisfied with the raising and transplantation of the cord. In more cases than have been recorded the testicle has come to grief by this unnecessary procedure. Tearing the cord out of its bed is without an anatomic reason to recommend it, a physiological act to suggest it, an etiologic factor in hernia, congenital or acquired, to indicate it, nor brilliant surgical results to justify its continuance. Leave the cord alone, for it is the sacred highway along which travel vital elements indispensable to the perpetuity of our race. The veins in the cord are not disturbed, unless a varicocele complicates the hernia. If the cremasteric fibres are unduly thickening the cord, they had better be removed along with adventitious tissue that is not unfrequently present.

**Lipomata.** An abnormal quantity of subserous adipose tissue