

gained by the X rays, I asked Capt. Cochrane of the Royal Military College, an expert in Cathography, to use the tube. This is the Skiograph. Fig. 1. •



FIG. 1.

The radius is united, apparently by a narrow bridge of bone 1-16 inch in width, the wire is plainly pictured, and between the ends which are thickened, there is a large triangular space on the inner aspect. The skiograph showed that it would require a much larger ferrule than had been prepared. On June 6th I cut down on radius from behind, removed the wire, cleared the ends of the bone and fitted the ferrule, and then, on separating muscles over ulna, the periosteum which was of a darker color than usual seemed to simply lie on the bone without any attachment. On section the medullary cavity was enlarged and filled with a brown soft substance not in the least resembling normal medullary tissue, and the bone was exceedingly thin. As no union would occur under the circumstances the limb was amputated.

The report of Dr. W. T. Connell, Pathologist, to whom the bone was submitted for examination is as follows :—

MICROSCOPIC EXAM. W. G. BONES OF FOREARM.

*Ulna*—Transverse section junction middle and lower thirds.

*Medullary Canal*—Greatly enlarged at expense of bone, consists almost entirely of fat cells but shows a few marrow cells and giant cells.

*Bone*—Markedly cancellous extending from within out. Haver-