

theory ; it forewarns us, and, of necessity, forcarms us. The ravages of tuberculosis throughout the world have impressed all physicians alike. Even the laity looks with dread upon this decimating disease. If we, therefore, at once recognize the tuberculous lesion in the bones that enter into the formation of the joint, and if we recognize the disease sufficiently early, the responsibility will become very great. We will feel that we have a dread disease to combat ; we will adopt prompt measures of relief ; we will insist on these measures being protracted ; we will know that the disease does not run a short course ; we will not be eluded by remissions ; false hopes will not tempt us to omit protection of the joint ; our duty to ourselves and to the patient, above all, will be emphasized. This much, then, on the etiology and the pathology.

I recall the title announced, and shall proceed to tell you how I would manage a given case. Let me first, however, dwell just a little on early diagnosis. When a case comes to you for examination, take advantage of all the means that nature has given you. Remember that you have a hip with which you can compare the hip suspected. Have the clothing removed. Test the functions of the sound joint fully and carefully. By so doing you will gain the confidence of the child, and remember that the confidence is the *sine qua non* in a physical examination. Spend the time that you have in making observations. Don't waste valuable time with irrelevant talk. Observe whether there be any difference in the size of the limbs. If so, record this difference. Note any inequality in the functions of the two limbs—that is, try flexion, extension, hyper-extension, rotation inward and outward, abduction, adduction. There is no occasion for any violence. Striking the foot or the knee with the palm of the hand to test the tenderness of the joint is not only valueless, but actually harmful. In the first place, it destroys the child's confidence ; in the second place, the muscular rigidity, which is at once excited, shuts out all information. Again, if it were possible to bring the joint surfaces suddenly into contact, an abscess in the bone might be ruptured, and a destructive joint lesion follow. So that such a procedure is, as I have just