1859.

A very good essay.

"Excision of the knee joint"

by

Dr. Evelyn Abbott.
The subject of excisions, is one of so much importance and interest to the practical surgeon, that I have been led to take up the application of it as the subject of my thesis.

I chose excision of the knee joint, because although much has been written lately to the joint by those of experience and ability, there still exists I expect today a certain amount of dislike to the operation, which time seems but slow to dissipating. And this is the time strange and unaccountable, when we look at the results that have followed the excision of the two chief joints, the elbow and shoulder; results so successful, that the procedure is her...
As the rule, an exceptional case seldom occurring, the judge for this a definite pet is it. It is however difficult to sort out the existing properties, so there exist the cherished teaching of some bright beneficent luminary of the past, and to learn into a debated question. His Calumny and his toothed teeth. The objectors that have been longer finding to arguments against its adoption are numerous but few dissapate. Then I shall consider them in detail hereafter. But if it is a point, the shock, the fear danger occurring from, is likely to follow, the expression of the large surface of practical interest. 3. Conclusion being on, the great risk consequent of Pyramids, and many others, are objections which are continually rising higher against it. For those on theoretical grounds alone feel it their duty to be partizant.

Improvement shown in Pathology, Treatment. The Rules are gradually obtaining for the better discrimination of cases, these through this imperfect, and falling short of that
FRED. J. NIXON. August 7th, 1857

This reference has been by me taken��顾
in relation to the case of Dr. Keiter
mentioned at page 9.
In the ultimate attainment of an all-during stability and surely their own
in the very nature of the science, surgery can here frrr to take its bent as an
exact science so called, though there are some, and they are a few, who
would wish to make disease, symptom, and
TREATMENT, THE UNREVISED CYCLE OF EVENTS
and establish laws like those of the medi-

cainc, unalterable and inviolate.
I think hardly say to lost the position
I should like to have,

In Curnin' B1yin' Fleming's late cutting
on the subject of lesion of the knee joint
"Says that if it could be discovered wholly
of its concomitant changes, it would be the
most brilliant triumph in operatio-

surgery, for they like most like in his
dissemination to an opinion so pacific.
I should like rather inclined to say that
I militantly standing the danger the fellow it
is, it, is the least an improvement in state
inhibits the function of limb in a disease so
local as hypertrophic disease of the knee joint.
This characterized the practice of surgery
prescrip. of its introduction.

I am not blind to the danger of surgery.
Pyrexia, its mortal agent of death, tends
from its very existence. Its chemical
be all the most direct effects of the surgeon,
de to its worst use, as it does to frequent
by virtue.

Strophanthos less farnese seem-
ly for its development. Let this be
forwarded as an objection then
I think not, is any fundamental rule,
any ill established principle of surgery,
any thing opposed to our common
sense, virtuous if its adoption? I think
with due deference to the opinions of others.
Many of whom are pre-eminent and disac-
rably its to the bounds of surgery, and
these opinions are entitled to the best en-
forcement of them. I am duty it is to
different from them. That no such objection
can be urged against it admitted as
arguments against its adoption.

Results from vanity must and will occur,
but they confer to make the system more

Stanley on diseases of the bones.

Page 246.

Burke on diseases of the joints.

Page 247.

Best of these evidence refer to page 7.
Careful in detail, I am willing to submit to the case he selects, and there to attribute some portion at least of the disease, result to his, the rejection and bent of nerves, better than that in the mus or in the extremity itself, and conduct it therefore as was said to Principle and the advice as a practical procedure. In the following pages, it will be unnecessary for me to enter at any great length into the various affections of these joints, subjects highly interesting, and to which every well-educated surgeon is or ought to be acquainted, but shall confine myself more particularly to special forms of disease which in common with the operation are of so much importance.

The knee joint as of the human body is affected by various ways, the chief consisting in the injury to the tissues external to it, and subsequently involving its special apparatus, or to the other hand in they migrate in the Cartilage, and bones entering into the formation of the joint. It is known
Into what form of joint diseases do we speak the Syphilitic variety, of the ends of long bones, in which, into which as are most common, a specific form of inflammation is produced with marked symptoms characterising, for the most part among the poor and ill-prepared, or among those of visiting that is termed a chronic chalcitis. Of these two varieties exist, one occurring in a different, the other in a circumscripted form, and more important than distinction are then the case to consider the advisability or not of submitting the patient to this operation. I shall just speak of this second variety—here the entire surface of the endoskeleton of the bone is more or less infiltrated with the chronic materia. It is reduced to a slow inflaming state of the lethargic state of the bone, the affected surface appearing crumpled and of a flesh red color. The temperature of the part is slightly raised and some pain through loss of a dry hard character is felt, and if this early inflammatory condition is not attended
Stanley the Sticker of the Bone

Brother the Sticker of the Joint
Changes of a most destructive character have ensued, involving the whole structure of the joint. The bone by lands and shores so as it may easily be removed by slight pressure. The cancelli are filled with a cheesy or fleshy material, and a chemical alteration in the composition of the bone is brought about. The cartilage which forms is considerably a portion of healthy bone gradually diminishing and in most cases almost entirely this effaces, so that the shaft of a bone becomes "converted into a thin shell of cartilaginous "including a medullary cavity of unusual "magnitude." alteration soon follows destroying the cellular structure of the bone, and the softened down deposit, gives but a few days to take through the already weakened parts. And this is not all, for this change of a destructin character has commenced and are going on in the cartilage itself, giving rise to an amount of pain and stiffness which soon exhausts the joints and spirits of the
Of the already debilitated patient, and
forming another channel by which the inci-
dating matter from the diseased joint finds
its way into the cavity of the joint. The
Synovial Membrane becomes altered in struc-
ture and its function destroyed, the
ligaments constantly in the stretch from the
increased size of the joint, and finally its
function and complete disorganization of
the joint results. Such cases in an early
perfect description of a diagnosis in
which the therapeutic processes are rever-
ted, and a little Conduction with Steri-
line then the reason why cases of this
disease form of Scorpion Stings—
venom, or Skin Binds of Scorpions,
Caries can be successfully treated by la-
putation alone. In general it is an accident
admirable and desirable in the modern
mode of dealing with diseased joints, I
conclude not a little here has been due
to the Canons of Consequent Therapy, and
especially the application of it to the Jo-

This: Times & Gazette Aug 7th 1867.


Tuberous joint, by adopting it in cases when physiology and pathology alike could lead us to expect an issue unfavourable to surgery on a joint as a patient.

A case which occurred to Dr. Keith of Aberdeen, and which has since been published. Facts practically as this joint, and large in that toe it may expect in all similar cases.

The patient was a man of 33. and the disease had existed for eleven months.

Excision was performed in March 1st, 1855. An incision and a greater was taken off the end of the femur, and half an inch from the end of the tibia, the Omer was expanded and every cell in, filled with a carbuncle deposit, and an abscess containing a tear. Some fluid of the joint was found in the centre of the tibia; abscesses outside and around the joint also existed. Which Dr. J. said I will disinfect. Tell the case for a very case that my skill could devise, I can ascend myself, and fought in 222 days, and at last to see his life saved and accomplished the wish in.
OCTOBER 20th 1855: “And on November 30th I
ốr the Third time Cured”

The conclusion of feelings, Jo in this case
ist a violent state, truly a feeling of the
knees has occurred, firmly assuming caution
of the main requirements and cons-
ditions of the operation, and at the same time
and the seat of the high blood one other
saw off and the joints recorded, it
would then become a question whether the
expansion and turning of the limb that must
have followed, would not have proved a
juvenile sediment to progression than
a true adapted artificial joint.

I am fully aware of the difficulty that
this encircles the correct diagnosis of the affection, and the impossibility of sati-
sfying myself with anything like certainty
of the extent to which the joints are involved.
I have seen limbs condemned to the am-
putating knife for an amount of disease
this might have been a less severe plan of treat-
ment, and had it been diagnosed
prior to its removal, would no doubt have
accident itself, and how witnessed this operation performed to point to its effect on little idea of the extent to which the disease had proceeded. Further plan to the operation — how truly this is to a satisfactory state for matter to be in, and although at present I do not see how the materials for forces in any state to have been applied at a safe conclusion in these cases can still be expeditious. Still in a practical point of view much can be done to obviate that recourse to amputation in cases of most just character.

In order then for improvement & care thereof, new views must be adopted, practical ones of most every step of the results of a more extended observation — as an instance of this I may mention the plan of dealing with a certain injection forming in a joint, by means of a small puncture which used to be made, by means of which the air leading up to the joint, being thus sterner pressure and irritating, and being unable to escape freely, leads to the formation...
of the articulation. Giving rise not only to much local mischief, but increasing also the constitutional disturbance.

Thanks however to Dr. Gay & Dr. Bath, their offer a steady solute of the difficult experience in dealing with cases in which the nature and extent of the disease cannot be ascertained, and that is, in all these cases, to make an exploratory incision into the articulation, and then ascertain the exact condition of the joint, and then to judge of course -stances as to the probable nature of the disease or articulation of the most advantage. This, I have been adopted by the one case, and I can conceive to be the same principle should not be adopted but rather of the knee. In the incision take here little modification, sic
avoid in either one of the other proceeding.
If this was made the rule and not
the exception as it is often is in such
cases, I think much of the objection
that exists to this is due to the
operation known as, and that he
should hear far less frequently of sec-
ondary computations, being required, as
in the case of St. Keith's treatment
above.

We now come to consider the second
form of the tubercular inflammation
in which the tubercular matter is deposited
in small quantities, and in circum-
stances of weakness, in other words, healthy
one. The two like the difficult form of the
somber black form equally as deser-
tructive to the functions of the action-
ulation; and it is this process the
marked distinctive character, which
under it admirably suited for
the operation in question.

So important do I conceive this to
be, that I must say a few words to

the pathology. I saw you announce that a few years back a distinction like this was considered more theoretical than practical, and I now say that the antiparalyzing knife is the favorite and only legitimate way of getting rid of the offending part, the exact pathology of the disease entered but little into the mind of the so-called practical surgeon.

Instead of the destructive chemical changes which in some cases have in the diffused form, along with a soft-edged condition of the tube, cancelled the structure, I find one of an opposite character occurring here. The process occurs under the name of chronic inflammation, and at the same time thickening and condensation of the tube demand the lessee alter, and it is in consequence of this peripherical enlargement by the successive repair of first one and the subsequent destructive changes take place.
The patient unable to look its eye through
the superficial part of the time
it naturally travels. That portion of the
bone which offers the least resistance
to its progress, that is, the superficial
to the cartilage of the joint,
then those changes of condensation and
expansion cannot take place.

Now, the diagnosis of this case is I
consider one of its ordinary difficulty,
and I am not aware of any the symp-
toms sufficiently characteristic, to
bear a symptom to predict it with certainty.
The apparent condition of the patient, as the
existence even of the affection
not uncommon. The phenomena of irritation
of the extremities of the joints of the
tendons may exist for a much longer period,
without giving rise to any symptoms, ex-
cept irritation or local. Pain and some
swellings occurring on the bone or
plaster. Limited in extent, but
because the attention of the surgeon, though
if the patient should be of an hysterical.
In this, the diagnosis, will be one of the ordinary difficulties. Our treatment under such circumstances can never be only palliative. As the disease known proceeds as it almost certainly does, and the joint becomes involved by the limitation that is set up, the disturbance and distress become more marked, and then any decided change in the knee occurs, then it is that he must begin to fear that relapse has occurred. The contents of the synovial closely to part their way till the cavity of the joint; the tissues within some become involved, and a train of symptoms are set up analogous to those dependent on synovial infiltration of the diffuse variety. On this, although I do not deny that a case like this may not recover, I do not deny any operation whatever. Still, when I consider the length of time that must elapse, and the uncertainty that must exist as to the ultimate result, I cannot but entertain that a judicious operation
like that of resection of the diseased articulation into two separate as by the most
direct and most satisfactory proceeding.
In those cases cut a small slice from
the ends of the two bones, or cut out a
free case of it Jones to clear out through-
ably the contents of the abscesses if none
than one exist, or be all that is required,
and if this be done with care and a freely
flowing surface be retained, but little
fear need be entertained of union
Taking Place, provided the Plan of Treat-
ment hereafter the then times, be
rigorously adopted.
In of course quite impossible to lay
down definite rules, in the treatment of
their affection, the mind the peculiar-
ities, and point of difference that
exist in almost every case, certain
features I think will be found ever to be
present to guide the surgeon to a higher
appreciation of the case. Endeavor him-
then how finished that I have to say
in them two highly interesting cases.
Instructive forms of Syphum, disease, lead I even the least to consider them more the details because the distinction that exists between them is too as a rule sufficiently discussed to be the subject of this paper, and its practical bearing for so strongly appreciated as its importance deserves. As I have mentioned before, it would be taking up too much time now to enter into lengthy details upon the diseases of the articulation which may best advantage be their treatment.

In short, I should merely have to note Brodie or Paper in any guide, and join the results of their observation, so far and clearly expressed in their own words, the language of my own—

The condition of Syphum, or pulp degeneration of the tympanic bone, fully recognized and understood, and the researches of Mr. Redfern on ulceration of cartilages leave but little else to be said in that subject. I shall therefore think best conclude this part of my
Paper. By stating that I believe this disease only exists, which are unsuitable to the operation of excision, and then a malignant disease involving the bones or soft parts of the articulation, and that form of osseous infiltration which I have considered in a previous case. When therefore disease, other than the two mentioned, has existed for a length of time, when all palliative treatments have been tried without success, when the pain and disfigurement become apparent, and the constitution begins to sympathize with the local disease, then it is, that the physician should act on the first principle of his profession, namely, to relieve or ameliorate the sufferer from the disease, and not merely to alleviate the pain of the patient.
Symptoms ofėulsion of the diseased joints.

Ps. 133.

Symptoms of disease mentioned in Elizabeth's story.

Ps. 606.
Having then spoken of the disease which I consider may be successfully treated in this way, I come now to the first place to consider. First of all the operation itself. The steps required to be followed present much difficulty, in order to a few instances show a true condition of the club exists and consequent contraction of the ligaments and tendons in the neighborhood of the joint. A variety of incision have been recommended and adopted—two semicircular incision in front of the joint and meeting at their extremities, so as to include patella, a bone shoe, or single semicircular incision so that the ligamentum patellae is preserved and during the stages of the operation may be pushed on the side and kept an H incision, which is the one here generally preferred. By means of any of these incisions the joint may be readily exposed, and the operation completed. But this is not the only point to be considered, in he has to provide...
In the supplication that follows, and our prayers may be heard, so that a speedy answer is secured for the discharge. I am quite certain that from what I have seen of this operation, much of its success depends on this particular thing carefully carried out, and it's for this reason that I feel disposed to regard the H in cinin as the most preferable, though both have in some cases the long & the radial cuts been far too sufficient for the purpose, and it has been found necessary to make additional slitting in the beam to liberate the joint up for and permit its bending in the soft tissues. The belief following has always been illusory. I cannot too strongly recommend the free use of the forge in all parts, particularly a suspicion of appearance. It is to be done properly, it will obviate the necessity of removing any but their sides of bone from the thick places, though some are to lend much defense, and these much
Sixteen. Science and Art of Surgery

Page 656.
Musk contraction of the soft parts: spirits, a hedge-shaded piece of bone will receive the pressure, before the two surfaces of bone can be placed in opposition, since known previous division of the tendon will facilitate the procedure.

See that Mr. Richen recommends that the lead be saved from other forwards. I mean, of a Butcher's saw, I have been seen this done, it seems so excessively good. With a way of applying it as cord, that I can hardly understand that I supposed advantage it can have from the new natural and convenient method of applying it from before backwards — another point of some interest and import. ance in the properties of clearing the patellas from them sounds. Then their resistance has just introduced, the pres- servation of the bone has considered of much importance, as by its union with the surface of the teeth of former bone, they re- placed. Solidity and strength to the opposed surfaces of bone —
In those early days of opinion of the knee, it has been thought that long union took place but seldom between the heads of the two bones, a bone or less joints between being the conducting medium in the majority of cases. Hence across the importance of preserving a one which has regained purity as much as taking the place of all others in an ordinary practice.

Experience from few cases is to modify this opinion respecting the mode of union that is adopted in these cases. Undoubtedly in the plastic motion of cases, the union by fibrous tissue obtains, though in a few cases from time appears, the evidence to grow in time from commencement, and grow in the same union is the result. If however in early these cases in which some slight motion is perceptible, in the ends those cases in which motion by fibrous tissue exists, in any length of time, the slight joint this movement becomes less evident as time elapses. In this at least all motion is lost, and a firm long yielding fibrous union is the
result. This is how a fact well known
to whom the reader had the opportunity
of watching cases of selection of the artic-
ulation. In contrast, in also hit this
subject, the clinical history of the operation
teaches us that in those cases in which at the
time of the operation the patella is formed
not to have been involved in the general
chance of the articulation, but then it
has been allowed to remain, subsequent
disease has appeared in it giving rise
to much secondary limitation, and
preventing any further healing process
proceeding in the joint, and then a second
operation for the removal of the offending
body has been required. This procedure
together with the additional limitation set
up in the joint, must add materially to
the danger of the operation, and by prolonging
the period of confinement must tend to
modify very greatly the ultimate result.
This fact struck me with the force of a
law which I saw, and have the opportu-
nity of watching from beginning to end.
The patient was a young man, and at the time of the operation the patella was found to be perfectly healthy, and was consequently preserved; he went on very well for some time, the parts had nearly healed, and there seemed every prospect of his making a speedy and satisfactory recovery; present-ly however he began to experience pain in the joint from which he had been entirely free since the operation, the parts became swollen, and a large quantity of the cond-mated fluid was discharged from the opening. This state of things brought the patient to a very low estate, and it was not until all hope of a healthy action setting in the joint gave up, that it was determined to remove the patella, this was done three months after the first operation, and by this time fluid was found in it and the soft parts adjacent, which appeared to have undergone a change since that time, along with the joint degeneration met with in the synovial membrane.
The patient known to me, usually called
and ultimately sank. Here are present
but attribute the discomes result stems
from the presence of so much additional disease
commencing at all probability at the patient
and partly, though in a lesser degree to the
short attending the second operation.

In looking over the different medical journals
I find that this complication has referred
to several surgeons, and has, I believe,
many times for to learn that one at once
and it has been found that the ability of
the mind to take it is not an easy bit by
such a procedure. On the other hand I
do not think he ought to throw away
the valuable lessons by experience these teach
us, directly valuable from being taught at
dozing a piece of life--and taking them
just considering the fact that my use in
our ultimately obtain the most if for all case,
that this time is especially prone to become
involved in secondary disease. Instead,
but thinks that the advantage of additional
Support obtained by retaining it is
more than counterbalanced by the addi-
tional risk the patient runs of at some
subsequent period being compelled to
undergo an operation for its removal.

Now come to consider a point in which
all surgeons who have had much practical
experience of the operation lay so much
stress, feeling as they do that most of the
ultimate success depends on a careful
subsequent treatment. How in this operation
it is necessary, that the limb be kept in
an absolute state of rest at all times, from
deeper the daily dressing that it receives,
that the proper surface be kept in close oppos-
itian and at the same time care being
taken that no undue pressure be applied
these conditions point our treatment to
ordinary practices, but if their careful
fulfillment be necessary in deciding
success in these cases, it becomes doubly
important here. Thus an Islaem.}
cases that require a greater anxiety of looking up, frequent diligence in bandaging during dressing, or more suspicious attention to those lines than those of the action of the

viewpoint. In cases their issue is all the more probability, it under treatment a somewhat lengthy period, the comfort of the patient

do well as the convenience of the surgeon right carefully to consider. It is surely within

the vision of the patient. Can be carried

out by a single long splint which is not

covered day after day it allows the recov-

ery dressings like attention to, also do I see the advantage to be gained

by leaving the skin unaltered, without

support for a few days. Whilst the had of

pillow, sandbags, which bandages, must

tend to under the subsequent treatment a

lesion, and difficult process.

The plan seem the adopted by the Chief

Command is highly recommend. With its

efficiency and in the ease with which it allows

all dressing to be performed and also in the

comfort which is attained in the patient.
An important element in the plan of treatment is the use of an apparatus by which the patient can be operated upon while suspended from a horizontal bar of iron and from which the weight is suspended. The chain is suspended from the ceiling in such a manner that it supports the string to which the weights are attached, and is attached to a block which can be drawn along the horizontal bar. By this arrangement the patient is lifted in a long continued and vertical position without displacing it in any way, which is essential to the condition of the limb. This apparatus is known under the name of "Dallas's Hinge" and is better for the treatment of ordinary fractures or of fractures, as a most valuable adjunct to our surgical appliances. From its peculiar arrangement of the parts, it will be found that our ordinary fractures can be so sufficiently to secure that proper rest of the parts, and allow of that constant attention to the lesions, in a short time and

Importance when a truly Satisfactory Surface is present – The Spirits I believe that a best adapted to New Cases is one described by Mr. Price in one of the journals, his which also is a very good illustration of an "Excise apparatus" complete. This is to carry more than an ordinary jacket, directed, the back portion being connected by a curved plate, and capable of being regulated by a screw, so that the patient may always come to the protected space. The common portion of the jacket or also provided with a wooden foreboard which can also be attached to the length of the leins by means of a strap to which it can. Besides, this is a side pocket i.e. also near, furnished with eyelet holes, which let into corresponding hooks at the sides of the jacket. This jacket instead of being made of a continuous piece of Lord, is divided into two parts, the back portion being connected by means of a slide for both parts, made sufficiently high, so as to admit of the more rapid access to the wound, without necessitating any dislocation of the apparatus, it is removed.
Secured central portion of the muscle also preserves the same object. While the side of the muscle is covered with a peripheral band, which produces a perfect state of rest, it is also done completely secured. The only after point to be mentioned is that the side-bone broken ends, accurately fitting the splint, and covered over it will still remain till the employed, as it would be highly injudicious, in the first few weeks to attempt to change point. The it can not will be released without lifting down the entire apparatus. I do not think the side of the splint absolutely necessary, though I think it may often be employed with advantage. In the case of children, we are not so easily impressed with the importance of remaining quiet as adults. The foot should be first covered to the fore one, as well carefully supported by some soft material, and subsequently, the outer limb carefully bent upon to the splint, leaving sufficient space about the wound, uncovered. The side of the splint
Carfully prepared Can be now applied to the
same day as the ordinary way of fruit used
in practice of the flower, and kept in contact
with the skin by means of a sheet of calico
than has lasted some time into details
the mechanical calming of the first part
acquainted: the rest of it will be done distinctly
from medicinal: usually an opiate
is administrations after the operation, and I think
as much upon the part of constant as a sleeping
in the operation. It can continue in many
cases, it is for需要，or if there be the
symptoms is not at times constant a time
marked, it is the calme freedom from pain and
the case the patient experiences. Why then
for opium? after positive that just as it is
absolutely beneficial - a simple and effective
treatment a moderate daily allowance of
stimulants. Should it be the most beneficial,
and the least for its administration. Why
the brandy, first because it is more quickly attainable
from fruits and secondly because in this day
is an effect of calming the alcohol
the removal of alcohol, which means is indefinite.
and variable a fortiori, at least to the Fort-Value of our Hospitals, to the other expedients. The medicinal effects arising from a daily allowance of brandy, say 3ij-3ij, in the case of fevers, and the infectious patients of the St. Kirk, and the habit of drinking coffee, is striking. And although this is certainly counter to the opinion and practice of many, I have for a long time believed in it as I have the possibility of, indeed I believe, after a year, some of the main points that answer. I think the same especially in the treatment of their cases. There are some with points of detail that I have not touched on. In ordinary practice, the rules of practice and reason of the particular region, in their admission and practice, have much to do with. I shall now in the other plan proceed to consider. Very briefly, some of the objections that have been urged against its performance, and bring for them some lesson, the I think, it is an excellent point may be, advantage to the many cases, etc. The place of incipient of the things.
Rev. Mr. Brunel...
The objections may be classed under two heads—(1) its danger—(2) its results.

From the only case in which it can arrive at a conclusion in this first point is that furnished by statistics; and so recently as April last a paper containing the results of the case in which the operation was performed from the time of the revival in 1850 till that date, was published. To which I must refer for minute details. The main points are best expressed in the following words:—

It appears that from 1850 to 31st Dec. 1857 the operation was performed 360 occasions, out of these 602 were for haemorrhage, the few accidents—of the fatal number of cases 32 per cent. fatal, 12 in every 50. Two of these occurring at the result of amputation of the thigh I find that out of 303 amputation performed during the three years 1854-57 49 in the London & Provincial hospitals, 91 fatal cases occurred, the fatal being the 49 in the country. And of the living, 44 in the
Lament March 12th 1869.
To be certain figures can be relied on and they are given in the authority of those whose duty it have to come to judgement. Surely it displays a fair amount of ignorance of facts to those who are still optically viewing the preceived belief of fatalism that occurs here as an objection against it.

Another interesting fact that these statistics show is that out of these 82 fatal cases 6 died of pneumonia, 6 from typhus fever, 5 from phthisis, and 4 from shock.

From these we can bring the frequent occurrence of pneumonia as an argument against it, can we but little aware of their true figures least we here as in an example of the truth. Pneumonia being the last but not the different cause, 10.8 per cent of the deaths occurring after specific cause due to this, but in a partial per cent lead before the 13.5 of all deaths. Circumpolar Society 378, Bryant, an observer that in 300 cases of amputation of the body and ear symptoms in the per cent of deaths in this cause 13.75 per cent.
May be this difference be due to the fact that in one case the medullary cavity is closed; then, in the other it is not filled up? It would seem from the tables that the complication is so frequent to be a secondary procedure, that the mortality does not seem to be increased. In 3 of 106 cases, 10 required amputation, and that only in the case did a fatal result follow, certainly a very lamentable result.

Some of the juncture connected with the floor of the pelvis seem absolutely to consider, as the frequent of recent appendicitis occurring, and also as the prelude to an injury to the limb. Then proceed to enter into甚 again, suffice it to say that excision of the knee joint for loss in 6 weeks, and a horse in very pretty condition, and then the complications around may be cured in 3 or 4 weeks, it may be as many months, where an artificial limb can be worn, and even if a few middle terms be devoted to the period of convalescence, provided that a useful limb be preserved to the patient, it can
My dear sir,

From my careful consideration of all the facts I have before me, I should be inclined to dismiss the opinion held of mortality, if it were known advantage. My accuracy to the fullest from the preservation of life itself; I think that for the conclusion can be come to, but the question given by the impartial listener, and that these be taken in favor of an operation which is terrible in the disease it kills, fails, and partial success in the case, that the best way, and by no means not, the use is not all to important.

Then an idea some points connected with the subject, which I think would have said something about them. Perhaps I may be inclined for the passion war, I still think that we look at any of importance - Time has been - But short: and the idea which the expanded must be a formal paper, embody, as that to whom the subject, but in containing merely a few scattered elements, formed when a fair experience of the operation is present.