

the cut extremity. These loops include also the connective tissue around the nerve, and they are only drawn sufficiently tight to prevent them from slipping.

The ends of the catgut loops are then tied together, and the nerve ends so approximated. He states that the results obtained in animals by this procedure were invariably good.

It is to be noticed, however, that perfect restoration was only obtained at the end of several months. There is little to commend this operation. If it appeared—in a recent case of wound—that the nerve ends were so damaged that so large a quantity would have to be cut away as to prevent the approximation of these ends, one would imagine that the attempt at suture would be deferred until the extent of the damage has been ascertained. One would expect, also, that a tight ligature around a damaged nerve would increase rather than diminish its prospects of restoration. It is, however, very doubtful whether sutures applied in the long axis of a nerve in reality do more harm than a ligature secured firmly about it.

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#### THE TROPHIC DISTURBANCES IN TABES DORSALIS.

DR. HOFFMAN (*Berliner med. Wochen.*, 1885, No. 12) is disposed to recognize other peripheral changes than Charcot's joint disease, perforating ulcer of the foot, etc., as occasional phenomena of locomotor ataxia.

His paper is of much surgical interest, but his data are scanty, and his conclusions are open to some question. His chief points are the following:

1. Spontaneous rupture of the tendo Achillis may occur in tabes. He cites the case of a tabetic man, who suffered rupture of this tendon while turning round in the street. The patient had been the subject of syphilis, and there is no evidence to show that the rupture was not independent of the cord affection, and that it was not due to syphilitic disease in the tendon itself.

2. The teeth may fall out in the subjects of tabes. The case is quoted of a man whose teeth came out without pain and without his having been troubled with caries or toothache. They were lost upon both sides, and a wasting of the alveolus followed. The patient also had been a subject of syphilis.

3. The arthritic lesion may appear suddenly in the subjects of tabes. The patient whose case illustrates this proposition, was turning over in bed when he experienced a loud crack in his hip, and was suddenly attacked with pain in the part. Much swelling followed, with great lameness and with shortening of the limb. The patient had had syphilis. It must be confessed that this case presents all the features of a fracture of the neck of the femur, and it is well known that in certain subjects this accident has happened in the identical manner described.

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#### ODORLESS IODOFORM.

DR. OPLER (*Centralblatt für Chirurgie*, July 25, 1885) claims to have introduced an odorless iodoform. The smell of iodoform offers a serious objection to its more general use in practice, and the attempts that have up to the present time been made to render the drug odorless have been but partially successful. In the mixtures of iodoform with Tonquin bean, balsam of Tolu, oil of peppermint, etc., the peculiar smell of the drug is still to be observed.