

bone trauma, a desirable accomplishment, and one which should be employed whenever feasible. A stout tenaculum was hooked around the lower end of the shaft of the bone and by traction brought into apposition with the lower fragment. The deformity, however, recurred as soon as the traction was released. A steel nail one and a quarter inches in length and a sixteenth of an inch in diameter was then driven through the fragments in the manner shown in Figure 2. This effectually prevented recurrence of the deformity. The nail was forced into place with a steel, lead-covered mallet. The limb was then encased in a plaster-of-Paris cast through which the negative shown as Figure 2 was taken. The position of the hand is also shown here. It will be noted that the deformity was not entirely overcome at the end of the operative procedure, but that when union was complete the slight over-riding was entirely corrected. No doubt the position of immobilization is responsible for the additional correction, as shown in Figure 3. The nail was removed at the end of three weeks and the limb immobilized, leaving the wrist joint free. A Pagenstecher thread had been placed around the head of the

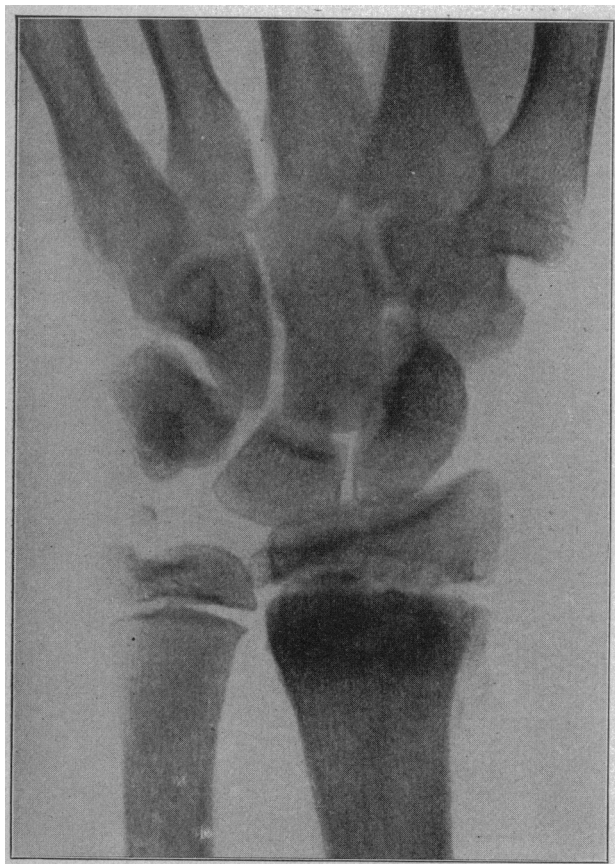


Fig. 3.—Skiagram showing anatomic result of treatment.

nail and brought out through a small incision in the skin flap immediately over the head of the nail, with the view, ultimately, of extracting the nail by this avenue. The thread was broken in the attempt, however, and it was necessary to withdraw the nail with a slender forceps. This presented no difficulty. The functional result is perfect. The anatomic result is shown in Figure 3.

As a general proposition the operative treatment of fractures is not widely employed, nor is this case submitted with the view of encouraging the indiscriminate employment of the open treatment of fractures. It is offered, however, as showing what the possibilities are when deformity can not be overcome in the usual manner. The danger of infection need only be borne in mind to forestall its occurrence.

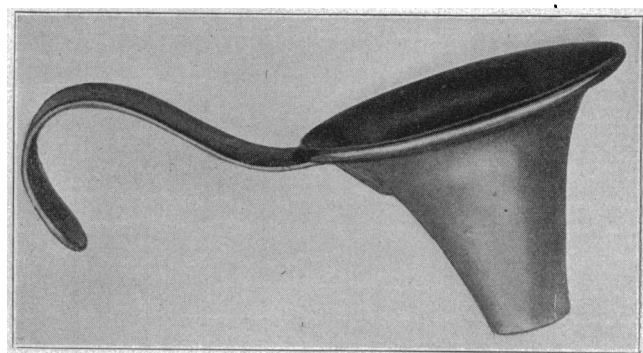
15 West Eighty-eighth Street.

## EAR SPECULUM WITH HANDLE.

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In dressing through the enlarged outer ear canal the cavity created by the radical operation for the cure of chronic middle-ear suppuration I have found the ear speculum with a handle very useful. The accompanying illustration shows a modified Boucheron ear speculum. The distal end is shortened and a handle is attached to the rim of the funnel. The end of the handle is hooklike and can be held either with the



Modified Boucheron ear speculum, natural size.

thumb and the second finger, or, with the second finger alone by bending the same, or, with the third or the fourth finger. In the latter instances some of the fingers are disengaged and can be used for other purposes. The length of the instrument is about 7.5 cm. (3 in.). The handle is about 1 cm. ( $\frac{3}{8}$  in.) wide.

270 Woodward Avenue.

## Special Article

### MEDICAL INSTITUTES.

#### HOW THEY ENTRAP THE UNWARY YOUNG—THE HIBBARD CASE AS AN ILLUSTRATION.

If the United States Circuit Court of Appeals sustains the findings of the lower court, Edward R. Hibbard of Oak Park, Ill., will spend two years in the Chicago House of Correction, besides paying a fine of \$1,500 and the costs of the prosecution of his case.

Mr. Hibbard is a man who has been a prominent citizen of Oak Park and whom Edward F. Dunne, former mayor of Chicago; William A. Hutchinson, postmaster at Oak Park, Frederick H. Wickett, attorney at law; C. F. Haffner, member of the Cook County Civil Service Commission, and others have regarded as a good citizen and a good neighbor. As to his general reputation for honesty—"It was good; it was very good." In fact, he was a neighbor to be proud of (so these people thought), and yet it is alleged (and the lower court found him guilty) that while Mr. Hibbard was posing as a model citizen and a bright and shining example for the Sunday-school-going youths of Oak Park, he was running a so-called medical institute, which bore two names because it had two doors, each of which opened on a different street.

#### TWO NAMES—ONE INSTITUTE.

One door was the entrance to the "Boston Medical Institute," the other the entrance to the "Bellevue Medical Institute." Both "institutes" occupy the same suite of rooms, both have the same managers, the same physicians and the same object.

That object is advertised as the "medical treatment of the private diseases of men"; but the evidence submitted to the United States attorney at Chicago was such that the grand jury found that the object of said institutes was to obtain