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OBSERVATIONS
ON THE
DISEASE OF THE HIP-JOINT.

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OBSERVATIONS

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Disease of the Hip Joint :

TO WHICH ARE ADDED,

SOME REMARKS

ON

WHITE SWELLINGS OF THE KNEE, THE CARIES
OF THE JOINT OF THE WRIST,

AND

OTHER SIMILAR COMPLAINTS:

The whole illustrated by

CASES AND ENGRAVINGS,

TAKEN FROM THE DISEASED PARTS.

By the late EDWARD FORD, Esq. F.R.S.

THE SECOND EDITION,

REVISED CAREFULLY, AND PUBLISHED, WITH SOME ADDITIONAL
NOTES,

By THOMAS COPELAND,

FELLOW OF THE COLLEGE OF SURGEONS, AND ASSISTANT SURGEON
TO THE WESTMINSTER GENERAL DISPENSARY.

Harum ingens dolor esse confuevit : isque hominem sæpe debilitat, et quosdam
non dimittit,——id genus difficillime curatur.

CELSUS, DE COXARUM MORBIS.

London :

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1810.

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EDITOR'S PREFACE.

FOR several years past, the Author had it in contemplation to publish another, and more enlarged edition of this Work; but constant avocation in practice, or interruptions of ill health, prevented its accomplishment.

When, during the last summer, he retired from the exercise of his profession, he purposed, as the employment of his leisure, to add to his work whatever new ideas or modes of practice his further experience and observation had presented to him, since the

publication of the former edition: but soon after his retirement, a sudden period was put to his intention and his life.

I am well aware how much more valuable this edition would have been from the Author, than from his Nephew. Having been, however, for many years, familiar with his practice, and frequently conversing with him, on this and other professional subjects, I necessarily became acquainted with the result of his further remarks on the several phænomena and treatment of those diseases which are the subject of his book. I have therefore subjoined, in notes, whatever has been judged explanatory or useful.

Golden Square,

May, 1810.

PREFACE.

DISEASES of joints, have been known, in all ages, to be of the most calamitous tendency; but it is to be lamented, that very little progress has been made in the methods of relieving them. I can by no means flatter myself with the idea, of having thrown any very considerable light on the subject; and am sensible that this part of surgery is still capable of great improvement; but, at the same time, it may be allowable for an individual, without the imputation of vanity, to publish the re-

fult of his experience, although he should not fully explain the nature of the disease, or lay down a certain plan of cure.

These diseases are of such importance, that they cannot too frequently be brought before the eyes of the public; nor can the attention of the faculty be too strongly impressed with the necessity of reflecting on them throughout all their stages. It is a fortunate consideration, that they are not incurable, although, it must be acknowledged it happens too frequently, that they are not cured. The reasons for this failure should be thoroughly understood. Is it owing to the destructive nature of the malady, and the insufficiency of every known remedy? May it

not often be occasioned by the patient himself, from neglecting to apply, in the first instance for proper assistance? Or, is there a want of discrimination in this disease, at its most important period? Whatever the cause or causes may be, it is proper that they should be known.

As far as my experience goes, the ill success attending the treatment of these cases, has been more owing to a want of distinguishing properly the nature of the complaint in its early period, or to the neglect and indifference of the patients themselves, than to the incurable nature of the malady, or to a defect of power in the healing art.

The morbid anatomy of joints does not seem to be generally known or understood. I am inclined to believe, that a disease of the bone itself, or its investing cartilage is almost in every case the real cause of what is usually termed a white swelling of a joint. If this be true, it may be asked, whether in cases of this nature, a practice more decisive than what is usually adopted, should not be used in the first instance of its attack? Is it not absurd to wait for surgical assistance till the contiguous parts partake of the firmous disposition, till all traces of the original disease are lost in that mass of matter, which surrounds the joint, when bone, ligament and cartilage are confounded together in one general destruction?

The true knowledge of a disease cannot add to its danger. If the bone be primarily affected, it should be well understood, that it is so; the hazard is to be met at its first approach, when it is, most likely to be subdued, and at this time, the resources of surgery are sufficient to afford means of relief for a carious disposition of bone in any part of the body.

Too frequently however, the diseased joint comes under the inspection of the surgeon, at so late a period, that it is impossible to hold out any other language than that of its entire removal. Hard indeed, at this moment, is the lot of surgery, and its professors! They know little of human nature who

do not feel, that to the surgeon, it is an irksome and painful submission to his duty, to propose such an operation. He often bears the disgrace of the whole previous management of the case, although called in at a time, when it is impossible to do any thing more, than to exert the final effort of his skill. Rarely has the surgeon an opportunity of patiently warding off, or preventing, the strumous affection of a joint, he being so seldom applied to, till the advanced state of the disease imperiously requires his ultimate attempts to preserve life.

The caries of the hip joint, which is the principal object of the present Treatise, differs from the caries of other joints, in no respect, but what

arises from its local situation. It is this circumstance which prevents it from being subjected to any important surgical operation, and the progress of the disease being thereby affected, more by the uniform proceedings of nature, than by the uncertain applications of art, an opportunity presents itself, of making an extensive observation on the powers of nature towards relieving a carious joint, and gaining much information, applicable to the treatment of diseased joints, in other parts of the body. It is evident that the sturmountous indisposition of the hip joint, is as formidable, and dangerous an evil as can occur to any other joint, yet from its first attack to its termination, it affords juster grounds for hope, than for despair.

If, in the course of this treatise, I may seem to have estimated too highly, or to have appealed too often to the works of the ancients, I shall be excused by those, who are well acquainted with the disease of the hip joint: the obvious difficulty of treating it obliges the practitioner to seek for information; and in the judgement of men versed in practice, he will not be accused of pedantry or affectation, who in difficult cases, shall adopt the sentiments of De Haen, consult Hippocrates, and, having consulted him, pursue his opinion, unless it has been corrected and improved by subsequent observations.

I wish not to overvalue the writings of the ancients; but who is

there, that has carefully perused the works of Mr. Pott, and has not seen the happy effects produced by a close study of the classic authors of surgery, combined with an unremitting clinical attention to diseases, and their symptoms?

To this subject, on which much might be said, the words of a most respectable surgeon are well adapted*: “Highly, as all practical knowledge ought to be valued, it must be confessed, that a man may learn a great deal by a just comparison of his own, with the observations of others, who have been placed in similar circumstances with himself, who may perhaps have been endued

* See the Preface to Mr. Howard’s Observations on the Venereal Disease.

“ with greater abilities, superiour in-
 “ dustry, and have had much greater
 “ opportunities of information. Nor
 “ should any man carry his predilec-
 “ tion for his own notions so far, as
 “ to imagine that the small contracted
 “ span of his life, how actively soever
 “ it may have been employed, can
 “ outweigh the productions of many
 “ centuries, and the united labours of
 “ a prodigious number of intelligent
 “ practitioners.”

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ERRATA.

- Page 7, line 1, of the note, for *innumerating*, read enumerating.
- 28, line 6 from bottom, for *setohs*, read setons.
- 55, line 5 from top, for *as is well*, read as it is well.
- 70, line 11 from top, for *into more*, read into any more.
- 72, line 12 from top, for *version*, read versions.
- 75, line 2 of the note from the bottom, for *which it seems*, read makes it seem; and *ibidem* in the last line, for *confound with*, read confound it with.
- 113, line 8 from bottom, for *resorce* read recourse.
- 115, line 3 from bottom, for *ostentations* read ostentatious.
- 117, line 11 from bottom, *dele* but.
- 122, line 7 of note from the bottom, for *source* read resource.
- 128, line 11 from top, for *usually inordinate* read usually an inordinate.
- 145, line 5 from the top, for *suppositions* read suppositious.
- 166, line 6 from the top, for *affected* read effected.
- 167, line 3 from top, for *of*, read or; and *ibidem*, line 4, for *or* read of.
- 175, line 4 from the bottom, for *deglution* read deglutition.
- 190, line 6 from the bottom, for *yet the* read yet by the.
- 254, line 3 in the notes from the bottom, for 'Εξίσαται read 'Εξίσαται.
- 255, line 2 from the top, after the word *naturam* put a. *Ibidem*, in the notes, line 9 from the bottom, for *voulæ* read vocalæ.
- 260, line 7 in the notes from the bottom, for 'Εξίσαται read 'Εξίσαται.

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GENERAL OBSERVATIONS

ON THE

DISEASE of the HIP JOINT.

SECTION I.

THE abscess of the hip joint is a disease attended with such various evils, incident both to the part affected, and to the constitution in general, and occurs so frequently that it could not entirely escape the notice, of any writer who has aimed at explaining the general action of scrophulous complaints, or their more immediate effects, on particular parts of the human body. Nevertheless, it has not been made professedly, the subject of particular consideration, except by De Haen, in his treatise "De Morbo Coxario," and

by Monf. Petit, in his well-known work on diseased bones*.

This disease of the hip joint, in every stage of its progress, from its earliest appearance, in slight lameness, and general debility, to its final catastrophe, unequivocally manifested in the destruction of the thigh joint, and in emaciation of the whole body, is marked throughout by peculiar and characteristic symptoms. These symptoms have been, however, in a great measure overlooked, and fewer cautions have been given, with respect to the treatment of this very common disease, than of many others of less frequency, and importance.

* The Author had not seen the Dissertation of Van der Haar, in the "Sammlung auferlesener abhandlungen," where the principal phenomena of the disease—the elongated limb, the flattened nates, and the pain of the knee, are very accurately described. But the treatment pursued by Van der Haar does not seem by any means so masterly, as his history of the complaint. It is sufficient to mention one case, in which he opened the abscess extensively, and thrust his finger into the acetabulum of the *os innominatum*.—"Nach wenig tagen, als man die fluctuation einiger-massen fühlen konnte, machte Ich in diesen letzten theil (die untere und aufwendige oberfläche des darmbeins) eine weite oeffnung und steckte meinen finger in die Pfanne."—Vol. II. p. 10. 1782. Leipzig. E. /

The difficulties in observing, or at least in discriminating properly, its earliest symptoms, and of counteracting, or removing them, when truly discriminated, are doubtless causes of embarrassment, and uncertainty, in every attempt to make a prognostic of its event. Be this as it may, the fallaciousness of its first appearance, and the difficulty of ascertaining the degrees of its subsequent injuries, are points granted by the generality of writers who have treated, or touched on the subject. The daily experience of surgeons cannot fail to convince them, that the whole process of the disease affords great scope for conjecture, and much diversity of judgment.

It occurs at all periods of life, but happens most frequently to children, from their infancy, to the age of fourteen. It often originates from accidents apparently inconsiderable. A degree of lameness, scarcely visible, is the first symptom, which is often ascribed to indolence, or to the indulgence of an awkward habit. The paleness, and languid appearance

which afterwards ensue, accompanied with a listlessness, and want of activity, are symptoms often considered as the effects of worms, or attributed to a general rickety disposition. Even when local injury of the hip becomes apparent beyond denial, to the least experienced observer, it is too often regarded as a decisive proof of a scrophulous taint, pervading the general habit; and with a view of relieving the part affected, recourse is immediately had to remedies, which are thought most likely to counteract the tendency of the supposed scrophulous affection.

With this intention, small doses of calomel, burnt sponge, *æthiops vegetabilis*, or *terra ponderosa*, are prescribed: or with the same view of obviating the strumous tendency, remedies of a tonic kind are administered, and preparations of steel, bark, or cold bathing are used, not unfrequently. Under these, and many other different regimens, the disease of the hip joint may seem to be suspended; for, like similar symptoms of scrophula, it is influenced in its progress by a variety of

circumstances, not immediately connected with mere medical treatment. Whenever a remedy for a strumous disorder is recommended, as having been, in some instances, fortunate in its exhibition, it ought to be recollected, that the season of the year, the temperature of the air, the alteration of a mode of living, and the natural stamina of the patient, should be taken into consideration, and have their due weight, before the efficacy of the medicine used, can be justly estimated.

The existence of scrophula, as a constitutional disease, cannot be denied. It often affects various parts of the body, at the same time oppressing, without overpowering, the vital energies; but its attacks are oftener local, and where they prove fatal, these destructive effects are produced by its deleterious quality, operating locally upon such parts of the animal economy, as are necessarily connected with its existence.

The brain, the lungs, the liver, the testes, and spermatic chord, the uterus, the ovaria, the anterior part of the bodies of the verte-

bræ, the joint of the hip, in common with other joints, experience continually the baleful effects of a disease, whereof scrophula may be supposed to be the cause, and to which it has not unfrequently given denomination. It may be added, that there are but few parts of the human body, which do not exhibit continual proofs of the danger of its local attacks, and of the inefficacy of general remedies. But so long as scrophula affects only the integuments, or external glands, the hazard from it is comparatively small; the constitution resists it with great energy, and the powers of medicine are capable of being exerted with probability of success. But there is not in this complaint a specific remedy; like mercury in the venereal disease, which can, with a moral certainty, impede its progress. If there were any such medicine known, of superior efficacy, capable of checking the inflammation, and suppuration of an indurated gland, or of preventing a thickened periostium, and enlarged bone from becoming a confirmed caries, it would greatly

supercede the necessity of having recourse to topical remedies, which are both painful, and uncertain.

Scrophula* is not unfrequently converted from a constitutional, into a local disease, by a variety of accidental circumstances, sometimes apparently slight, and certainly such as might befall a constitution perfectly sound, with little, if any ill effect. But when, by some untoward accident, the locality of scrophula is determined to the hip, and seated in the joint of that part, it brings in its train serious, and stubborn complaints. A probability that the disease will terminate fatally, is strongly pointed out, by long illness, generally accompanied with colliquative sweats, and purgings, anasarcaous swellings in the lower limbs, emaciation in every part of the body, and frequent suppurations round the hip joint,

* It is very remarkable that Dr. Falconer, in innumrating the causes of the disease, should have so constantly *avoided* mentioning scrophula, which by the unanimous consent of all writers on the subject, is considered the most frequent of all causes. E.

unmanageable by any treatment applicable to other abscesses.

When this disease terminates in death, the dissection of the part discovers a caries so extensive, as to include not only the head and neck of the thigh bone, and the cotyloid cavity, but great portions likewise of the adjoining os ilium, ischion, and os pubis, with all their ligaments irreparably injured. Such indeed are the facts revealed by dissection, that there is no wonder at their having given rise, and currency to an opinion often assumed, that the hip disease is, from its earliest origin, irremediable. It must be confessed, that it is difficult to conceive how such an extensive caries of bone as is visible after death, could have been either prevented, or remedied. Nevertheless, these discouraging conclusions are not always just, or well founded; for there is no doubt but that diseases, finally attended with large suppurations, which ultimately occasion great derangement, and havock in the animal machine, originate

from slight causes, and admit of remedy, in their beginnings.

A careful observer may discover, and destroy the seeds of many a fatal chronic disease, before they become deep rooted, and dangerous. Even stumous affections of the lungs, and liver, begin with slight obstructions, and indurations in the substances of those viscera, which, from the invisibility of their nature, go on, producing their consequential ill effects. Obstructions increase, and multiply, till at length inflammation ensues, either excited by the original cause, or brought into action by some adventitious circumstances, followed by a train of fatal consequences, which the expedients of skill may alleviate, but are not likely to cure.

The discriminating symptoms of internal chronic diseases, are not yet delineated with such accuracy, as to instruct the generality of practitioners, how to distinguish them in their incipient states, and earlier stages, or how to proceed on a certain efficient practice, either for their prevention, or their cure.

It ought likewise to be noticed, that although an experienced and attentive observer, might very truly distinguish these latent diseases in their first beginnings, and, alarmed by the apprehensions of their ultimate ill consequences, would willingly exert his utmost ingenuity to check them, yet the patients themselves feeling, or fancying inconveniences apparently trivial, cannot easily be prevailed upon to adhere with steadiness, to any well-digested plan of prevention, or remedy, in order to avert evils, which they imagine to be merely contingent, or at the worst, not likely to take place, but at a period considerably remote.

This happens not uncommonly in cases of scrophulous affections, tending to suppuration in the cavities of the body ; but the progress of disorders, situated in the extremities, comes more immediately under the cognizance of the surgeon, and is by no means so problematical, or so hopeless. The parts affected by them; are always more superficial, and

consequently the progression of disease is more easy to be traced, than in the viscera. The joints of the upper, and lower extremities, are sufficiently perspicuous in their structure, and cannot be diseased to any dangerous degree, without betraying an inaptitude for their functions. The moment that this becomes obvious, the surgeon investigates the cause, and where symptoms shew the remotest danger of suppuration, instantly has recourse to those local applications, which experience has evinced to be, not only capable in many instances, of stopping the advancement towards caries, but even sufficiently efficacious, to recover the limb from a diseased, to a healthy state.

The caries of the hip joint, always painful in its consequences, and sometimes fatal in its termination, steals on at first so imperceptibly, and arrests the attention so little, that it is scarcely considered as a serious disease. The constitution is not at first, materially affected by it; paleness of countenance, fits of lan-

guor and heaviness, succeeded by proportionable flows of spirits, and sudden exertions, are incidents so usual in the lives of young people, that they pass for common circumstances, and attract little or no notice. There are however, symptoms, often accompanying the first pathognomonic marks of this disease; I mean a sort of limping gait, lameness scarcely discernable, and a weakness of the leg, and thigh, just beginning to be apparent.

Moreover about this time, the limb, on strict examination, will be found, both in the thigh, and on the calf of the leg, to be really lessened in its circumference. A striking alteration likewise, takes place with regard to its length. It is more, or less elongated; the elongation is visible, and the degree of it ascertainable. Let the patient be placed in a horizontal position, with both his legs extended properly for a comparison with each other; the patella, with the condyles of the thigh bone, will appear in the diseased limb, manifestly lower than the same bones on the

found side. It may be still farther ascertained by an inspection, and comparison of the relative situations of the great trochanter, or the internal malleolar process of the tibia, with the corresponding parts of the sound limb.

On viewing attentively the patient in an erect posture, it is clearly discernable that there is, on the diseased side, an alteration with respect to the natural fulness and convexity of the nates, that part appearing flattened, which is usually most prominent*; and a little below, towards the thigh, there is a degree of swelling, different from, and strongly contrasted to, the natural appearance of the sound limb.

A pain in the knee, † is another remarkable symptom, not unusual in the course of this dis-

* Many of these characteristic marks of the disease are shewn in plate I.

† Mr. Ford had remarked that this symptom was always synchronous with the elongated limb, it commenced with it—it continued as long as the diseased limb was longer than the sound one, and ceased when the thigh began to resume its proper length, or to become shorter; and he had never observed it in the latter stages of the disease, when the thigh affected was shorter than the sound one. E.

case, and so violent is it at times, as to disturb the repose of the patient at night, and to occasion the most agonizing screams. The knee nevertheless, after the most minute examination, will be found in a perfect sound state, although it has often been subjected to the fruitless applications of fomentations, plasters, and embrocations, whilst the real seat of the disease has been neglected, and the process to caries, permitted to go on with its natural rapidity, accelerated occasionally by adventitious circumstances.

It may be still farther observable, that the patient, in standing, does not support the weight of his body equally on both legs. The sound limb will appear strongly extended, bearing upon it more than its due proportion of the weight of the trunk, whilst the other projects outwards from the body, with its knee bent, and the patient discovers an inclination to rest rather on his toes, than to support, the weight of that side of his body, fairly on the whole surface of the foot.*

* See plate I.

He not only becomes more unable to move the diseased limb, with the same facility as the sound one, but the lameness increases on him so much, that he is under the necessity of grasping the affected thigh with his hand, in order to give it a greater progressive power.

There are also other symptoms, in the early state of this disease, which ought not to be passed over in silence, as every circumstance, which may be thought characteristic, deserves notice, and serious consideration. In a morning, the patients walk stiff, and with evident difficulty; the difficulty becomes less apparent in the course of the day, but weariness comes on, in an unusual degree, towards the evening, and pain ensuing, they repair to rest at an early hour.

In quick exertions, and in running especially, they are apt to fall; and though often averse to motion, they have at times great liveliness, and a prompt disposition to exercise. In their recumbent posture in bed, the thigh affected is ordinarily bent forward, and every

attempt to alter that position is attended with great pain, which is particularly increased by every degree of exertion, or violence, employed to stretch out the limb to its full length.

The parts surrounding the joint, on pressure, indicate no great degree of painful sensation, but in general, some tenderness, where it is most likely to suffer by compression, particularly behind the great trochanter, where there is not much cellular membrane, or muscle, to cover the joint. They feel moreover, a tenderness in the groin, where the lymphatic glands are frequently found to be a little enlarged.

The disease, for some time at least, indicates itself by the symptoms above mentioned; it is not, however, uniformly painful, but variably so, being influenced by the efficiency of the means administered to counteract the process of a scrophulous carries in the joint, or by the power of the constitution withstanding its attacks. It frequently happens, that the unfavourable appearances alter, and are suspended for a

considerable time, inasmuch, as to be seemingly removed; but if they return, it is with additional violence. The lameness becomes more obvious, the pain more sensible, the emaciation of the limb more visible, and the general prevalence, and inroads of the disease on the constitution, manifest themselves strongly, by slow hectic fever, and great prostration of strength.—

At length it happens, that the limb, which was before elongated, shortens; and whenever this circumstance takes place, which may easily be ascertained by an actual mensuration, it announces the probability of an ensuing external suppuration; and the great difficulty of preventing it, calls for the most unremitting exertions of the surgeon.

The rapid approach to suppuration is marked by an aggravation of all the local symptoms. A greater degree of tenderness and irritability in the parts round the joint, are now manifest to the touch; the enlargement of the external parts becomes more visible;

particularly on the upper, and exterior parts of the thigh, over the vastus externus muscle, where the matter usually gathers, and projects. During this period, the thigh becomes more shortened, contracts in a bent position, upward to the groin, and is less capable of motion, the leg wastes more apparently, the foot can scarcely be put to the ground, and finally, the patient, no longer able to depend on the limb affected, supports his body on crutches, and on his sound leg, whilst the diseased one hangs a burthensome, and painful appendage to the trunk, with its foot extended, and perhaps oedematous. This miserable state of the disease continues for a longer, or shorter space of time, till the abscess bursting, discharges either a thick matter, or else a thin, serous fluid, intermixed with substances, resembling curds and whey.

At this time, another alteration often takes place, which generally marks the most distressing period of this formidable complaint. The patient grows languid, and hectic, loses his appetite, becomes subject to colli-

quative purgings, sweats profusely at nights, and sinks apparently, under the pressure of his complicated maladies.

If the disease does not now terminate fatally, as it often does at this critical period, these distressful symptoms continue for a long time. If the patient happily struggles through them all, and at length recovers, it is after a tedious confinement to his bed, with a distorted hip, and an emaciated limb, which has either formed an insecure connexion with the os innominatum, or become ankylosed in the hip joint.*

It deserves however, a particular observation, that an external suppuration is not always a necessary, and unavoidable consequence of the shortening of the thigh bone, and of the carries of the hip joint. Instances occur, not unfrequently, in which patients undergo the whole process of the early symptoms of this disease, to the elongation, and shortening of

* See plates II. IV. and V.

the limb, and even an anchylosis in the joint, without any external suppuration.*

At times too, it happens, that a suppuration is formed, that the abscess bursts, and a shortening of the limb takes place, when yet no fever ensues, nor any very dangerous symptoms supervene.† These very fortunate circumstances are however, rare, compared with the great frequency of cases, in which numerous evils usually result from the caries of the joint, and its external suppuration.

In the investigation of this, and every other disease of equally dangerous consequences, it is advantageous, and indeed requisite, to acquire the truest, and most accurate possible notions, of the injurious alteration in the internal parts, which constitutes the cause of external morbid appearance. The pathology of this disease, is certainly most wanting in its

* Neither is an anchylosis a necessary consequence of the shortening of the limb, I have now under my care a boy about ten years of age, who has undergone the disease with repeated suppuration, and the limb is half an inch shorter than the other, although he has the perfect use of the joint of the hip. E.

† See cases XIII. XIV.

earliest stage; for at its conclusion, opportunities too frequently occur, for the minutest examination of the nature, and effects of this malady, which is uniformly found on inspection, where it terminates fatally, to go on in its operation, to the ultimate destruction of almost all the bones, ligaments, and cartilages connected with the hip joint*.

The disease here treated of, is not fatal in its first attacks, nor productive for some time, of very great, or insupportable inconveniences. It is in most instances, considerably advanced in its dangerous progress, before application is made to the surgeon, who has but seldom, a fair occasion to attend to it, in its first beginning, and earliest stage; and whenever he has it in his power to trace its primary operation, and ill effects by dissection, it can only happen, when the patient falls accidentally a victim to some other disease. Rarely as this is likely to take place in the practice of an individual, it has however occurred to

* See plate VI.

me, more than once, and warrants me to affirm, that a considerable caries of bone, in the cotyloid cavity, or in the head of the thigh bone, may exist, before any external symptom could have ascertained such a circumstance.

The following is the case of a patient, who suffered from the disease of the hip joint, for several months labouring under the primary symptoms characteristic of this complaint, but who died at last of a violent fever, not apparently connected with his local complaint.

Thomas Welsh, a boy ten years of age, of a fair complexion, brown hair, born of healthy parents, both living at this time, received a blow on his groin, about fourteen months before his death, from a cricket ball, thrown with considerable force. His mother, soon after he received the blow thought that he halted a little, but his lameness was not very apparent. It was not however, till eight months after the accident happened, that it was judged necessary to have recourse to a

surgeon for advice. The lameness at this period was very perceptible, and the pain in the groin and thigh, shooting backwards toward the nates, was so acute, that, although naturally a cheerful child, he could not contain himself from frequent screaming.

He had now become uneasy, restless, and was continually getting up from his chair, particularly at his meals, which he preferred taking in an erect posture, resting on the sound leg, or frequently shifting about, to vary his mode of standing. His health in other respects did not appear to be much affected, his appetite was good, and his sleep was not much interrupted, till a short time before his death, when he began to cough, and to shew symptoms of weakness.

At the time he was brought to the Westminster General Dispensary for assistance, the pain had become more violent in the groin, and in the thigh; a very considerable degree of lameness, was manifest, and the inguinal lymphatic glands were swelled: a caustic was then applied to the hip, a little

behind the great trochanter ; soon after this application, he grew so much better that he indulged himself in the usual pastime of boys, jumping with a rope, and standing upon his head ; his cough was much abated, and the pain in his hip was entirely gone. The limb, notwithstanding, still appeared to be wasted, and was certainly elongated.

Soon after this time he was seized with a fever, attended with petechiæ, which put an end to his life in the course of a few days. I obtained leave to examine the limb, and found the elongation still very evident, and demonstrable in the dead body. There was in the cavity of the hip joint, a small quantity, about a tea-spoonful of matter ; the head of the thigh bone was little inflamed, the capsular ligament rather thickened, the ligamentum teres united in its natural way with the acetabulum ; the cartilage lining the cotyloid cavity eroded in one place*, with a small aperture, through which a probe might

* See plate III. fig. I.

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be passed, underneath the cartilage into the internal surface of the os pubis on one side and on the other into the os ischii; and the opposite, or external part of the os innominatum shewed more appearance of disease, than the cotyloid cavity*.

Some time before, I had examined by dissection, another disease of the hip joint, which had not proceeded to an external suppuration; but not having preserved the morbid parts, I can only say, that the disease was in this subject farther advanced, that the limb was beginning to shorten, and to be contracted forward, that the patient, who was a boy at school, being thrown over a form, was taken home in great pain, and died in a few days after, with fever and convulsions.

On examination of the joint after death there was no appearance of inflammation, no tension, or swelling externally, but the cotyloid cavity was thoroughly carious, the cartilages eroded, the head, and part of the neck of the thigh bone crumbled away.

* See plate III. fig. II.

The foregoing cases, duly considered, suggest various reasonings, and seem to warrant the following conclusion; namely, that a morbid state of the cartilages and bones, which form the hip joint, is the real origin, and the primary efficient cause of the whole train of alarming symptoms, which accompany this disease, from its earliest appearance, to its ultimate termination.

The carious state of the bones in question, is not therefore the effect, but the cause of the formation of matter, and this caries is not to be attributed to a disordered state of the synovia corroding the head of the bone and the cotyloid cavity, nor to the acrimony of any matter collected there, and supposed to produce this ill effect. There is a necessity for ascertaining distinctions of this nature, in order to found the proper indication of a mode of cure: for, if this disease were to be ascribed to the causes above mentioned, either an acrimonious state of synovia, or an existence of matter of a corrosive quality in the joint, a practice very

different, from what is now generally pursued, would certainly be preferable.

Mr. Freke, in his "Essay on the art of healing," p. 218, conceiving the caries of bone in the disease here treated of, to be the effect of an acrimonious synovia, recommends an early opening into the joint, as the best method of preventing the future pernicious consequences. He compares the use of synovia to "Good olive oil for locks," but, adds he, "If oil of vitriol be used instead of it, the effect need not be told."

It must be admitted, that if Mr. Freke's theory of this disease were unquestionable, the early opening he recommends, would be the most eligible practice, as tending to discharge, in the quickest way possible, the noxious fluid. It is however certain, that such a practice is found, by experience, to be injurious; for the opening of abscesses of joints, whether it be made by caustic, incision, or seton, has not the supposed tendency to prevent; on the contrary, is known to increase the disposition to caries, and must conse-

quently, promote and accelerate every bad symptom, resulting sooner or later, from the strumous indisposition of the affected part.

It may still be thought, and urged against what has been advanced, that it contravenes a common opinion, that the cause of this disease is not primarily to be looked for in the joint itself, that it may as well be supposed, to originate in the more external parts, in the involucra of the joint, in the cellular membrane, in the periosteum of the bones, in the muscles, or in the lymphatic glands. It may be said too, that such a caries of bone, or such a disposition to caries, as is stated in the case, above mentioned, cannot well be conceived to exist in so early a period of this complaint, and yet continue so long latent, to all external appearance inactive, or by its operations productive of no very dangerous ill effects.

This objection is the more specious and plausible, as it is admitted, that the subjects of this disorder, nevertheless enjoy a mediocrity of general health, and, for no inconsiderable space of time, are but little distressed by its

local inconveniences. Whereas in no very dissimilar cases, a disease in bones of less magnitude, and in parts of less importance to the animal œconomy, discovers itself frequently with much greater rapidity, by hectic symptoms, and other very conspicuous ill effects. It may be added to all this, that such a caries of bone in a part, so liable to friction as the hip joint, would most probably cause inflammation, and bring on suppuration, much sooner than it usually takes place, according to the foregoing account of the disease.

Such analogical reasonings without doubt may speciously be urged, and may be fairly answered by arguments, deduced likewise from analogy. But, what is to be gained by opposing suppositions to facts? The latter remain invariably the same, however we may vary in our opinions about them. The facts, with regard to the morbid anatomy of this disease in its earliest stages, can only be proved by the dissections of subjects, who happen to die during its first attack.

In considering however, the objections be-

fore mentioned, it may be observed, that in vital parts of the human system, even in the brain*, strumous indurations are known to subsist, without certain indication, or immediate discovery of their dangerous tendency; their mischievous effects are often slow and gradual, and the fatal symptoms do not appear till some time after, according to the natural progress of the disease, or its exacerbation from some external, or internal cause, which excites an inflammatory diathesis in the part.

In like manner, a strumous induration, and enlargement of the liver, or of the spleen often subsists, and is known, as a chronic disease, by its effects on the animal oeconomy, for a long time, before it produces inflammation or suppuration in the substance of those viscera an accumulation of water in the cavity of the abdomen, or any of those symptoms, which are the final, and fatal consequences of the original disease.

Even in the lungs, that part of the human

* See London Medical Journal, Vol II. p. 56.

body most subject to stumous affections and necessarily in continual motion, a disposition to pulmonary pthifis, is well known to exist long before its fatal termination in tubercles, and suppuration.

But to institute an analogical reasoning, much more nearly allied to the disease in question, is it not well known, that in the disease of the incurvated spine, so accurately described by Mr. Pott, a disposition to caries, and even a destruction of parts must necessarily have taken place, before the caries is indicated, or ascertained, by that angular incurvation, which is the marked effect of a loss of substance, in the anterior part of the body of vertebræ? Every joint of the upper, and lower extremities, occasionally exhibits a stumous indisposition of its cartilages, or bones, and this may exist, and for a very considerable time, with more or less local inflammation, before any external suppuration takes place.

The disease of the hip joint produces a weakness of the lower limb, necessary to be distinguished from paralytic affection, to which

which it is liable in common with other parts of the body. It is likewise requisite to discriminate it from that partial debility, often incident to the lower limb, in the complaint well known by the name of psoas abscess.

As the disease of the hip joint gradually advances towards suppuration, in the course of its natural progress, the local injury of the joint becomes evident, from external appearances; but in the beginning, and earlier periods of the calamity, its diagnostic signs, although highly necessary to be fixed, are not always obvious.

The pain in the knee, the flattened appearance of the nates, the elongation of the limb, the uneasiness felt in moving the joint, clearly discriminate the hip disease from a paralytic affection. The same symptoms serve in some measure to distinguish it from the abscess known in many cases, to originate from a caries of the lower dorsal vertebræ, or those of the loins, near the origin of the psoas major.

In the psoas abscess, the matter secreted in consequence of caries, is prevented from

making its way outward on the back, by the thickness of the bones, and the strong compages of the muscles on the loins, and is still more strongly restrained from making its way forward, by the peritoneum, viscera, and abdominal muscles. It therefore falls down on the psoas muscle, and passing under Poupart's ligament, sometimes pushes outward in the groin, but more generally, pursuing the course of that muscle, forms an abscess, near its insertion, in the inside of the thigh.

In the progress of this abscess, there are some external symptoms, not unlike those of the hip disease. Of these, it may be proper to mention here, that the thigh is generally bent forward, which gives a flattened appearance to the nates on the side affected. This symptom, in the disease of the hip joint, seems to arise from the inability which the patient feels of supporting the trunk on the infirm joint; whereas in the psoas abscess, the similar circumstance of the thigh, being bent forward, and upward, so as visibly to give the

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 appearance of depression to the glutæi muscles, may probably be owing to the irritated condition to which the psoas muscle may be subjected, from the weak, and morbid state of that part of the bone, into which its origin is inserted.*

In discriminating between the abscesses of the hip joint, and that proceeding from diseased vertebræ, it must also be remarked, that in the latter disease the matter insinuating itself between the muscles of the back, does at times make its way outward on the loins, and even on the nates, and often bursts nearly in the same place, where the abscess of the hip joint frequently appears. Nevertheless the surgeon, who attends carefully to the antecedent symptoms, will not find it difficult to discover the real seat of the disease, which it is of the most

* I have considered the psoas abscess, as originating from disease in the anterior part of the lower dorsal, or the lumbar vertebræ; although this may not be universally the case, I am authorized by the opinion of the most respectable writers, to say that it frequently is so; and, from my own experience, I must affirm, that whenever I have had an opportunity of inspecting, after death, the morbid state of the parts connected with this disease, I have uniformly found a very considerable caries of the bones above mentioned.

importance to ascertain with precision, in the first instance, in order to institute a proper mode of cure. In the latter stages of these different abscesses, the true knowledge of their locality is not equally essential, as the treatment of both necessarily becomes the same, or very similar.

The elongation, and wasting of the limb, the pain in the knee, the uneasiness felt in moving the head of the thigh bone in its socket, are all prominent, and characteristic features of the hip disease. If yet, at times, there may be appearances in the psoas abscess, which bear some resemblance to the symptoms above mentioned, yet it must certainly be admitted, that they are by no means so strongly marked, as they are in the abscess of the hip-joint. Moreover, the psoas abscess has generally one leading symptom peculiar to itself, namely, a sensation of weakness in the loins, near the origin of the psoas muscle, attended with a degree of tenderness palpably discoverable if the parts undergo the examination of the finger.

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SECT. II.

Observations on the Modes of Treatment usually employed for the Relief, or Cure of the Disease of the Hip Joint.

HAVING, in the preceding section, premised some general observations on the disease of the hip joint; on the ways of ascertaining its existence; and the means of distinguishing it from the most similar complaints; I may now suppose a case of this disease: let it be stated then, as in its early stage, not yet so far advanced, as to be productive of any manifest indications of external suppuration; I shall only suppose its actual existence, and its locality ascertained, or at least strongly marked by pathognomonic symptoms.

The first object of immediate inquiry must necessarily be, what is the best method to be

taken, to relieve the inconveniencies it has already occasioned, and to prevent the future calamities likely to arise from the disease, if left to its natural course.

In the consideration of a remedy, or mode of treatment, adequate to remove a complaint which is either a disposition to caries, or a real caries, actually existing in the bones of the hip joint ; it would be useless to enumerate the great diversity, and contrariety of fomentations, plaisters, and embrocations, which have been tried, repeated, and recommended by regulars, and irregulars, in the practice of physic, and surgery.

Internal medicines have not been more successful. Hemlock and burnt sponge, preparations of mercury and antimony, have been all employed to remedy this disease, without the record of a single fortunate event. Nor have tonic remedies been used with greater advantage. The cold bath, so far as my experience goes, has been uniformly detrimental, without the shadow of an exception. The Peruvian bark does not seem to possess any powerful

influence over this complaint, although it may be found serviceable in particular cases, where colliquative sweats, and symptoms of great weakness, seem to arise from the general debility of the habit, during the natural progress of the malady.

Bathing in sea water, both warm and cold, has been, from the earliest records of medicine, an usual practice in scrophulous complaints. The elder Pliny* mentions it as a remedy used in his time for diseased bones, as well as other disorders. In modern practice, it is notorious that for almost every disease, which can be attributed to a strumous taint, patients resort to places situated on the sea coast, either for the advantage of bathing in the natural marine element, or for using it as a warm bath, and in some cases, to experience the alteration likely to result from an exchange of the polluted atmosphere of a large city, for that of an open country near the sea.

The benefits derived from this plan in

* *Histor. Natural. Lib. 30. cap. 6.*

many scrophulous cases, are so very obvious, that they leave no room for scepticism to question their reality, and seem to warrant the propriety of trying the same method of cure in almost all cases that are evidently of the same nature. It is nevertheless certain, that sea bathing is beneficial only in particular cases, and by no means, to be considered as a specific remedy in every disease of a scrophulous tendency. In maladies of this description, which principally affect the lungs, and other viscera, its efficacy is very problematical; and even breathing in an air near the sea, has been accounted by physicians to be prejudicial in pulmonary complaints.*

It is not uncommon to find many cases of the abscess of the hip joint complicated with a delicate and irritable state of the lungs, which creates an insuperable objection to cold sea bathing. As this circumstance, however, does not always occur in the stumous indisposition of the bones of the hip joint, a remedy so well

* See Dr. Carmichael Smyth, on Consumptions.

known as sea bathing is, to be powerfully adapted to counteract scrophulous tendency, deserves a fair trial, and promises to be useful, in the incipient stages of the disease. It is not unlikely, but that, in an early period, sea air and sea bathing might check the strumous taint, and otherwise invigorate the constitution so far, that the part more immediately affected might resume a healthy tone.

But in my own experience I have always found, that sea bathing is not to be depended upon, when the disease is considerably advanced, that is, when violent pain, distortion of the hip, contraction and shortening of the limb take place, and manifestly mark a prevalent caries, and an impending danger of external suppuration. In all such cases sea bathing is frequently followed by some of the most dangerous symptoms of this disease.

There can be little doubt, but that every degree of motion, produced in distempered bones, where the cartilages are known to be abraded, must be highly hazardous.* Now

* It is of the greatest importance to distinguish those cases,

it is almost impossible to have recourse to the remedy of sea bathing, without irritating the parts by unavoidable motion; and can there be any thing more likely to happen, than that the friction of unsound or injured bones will create mischief, out of all proportion, overbalancing any good, which can reasonably be expected, from the invigorating quality of sea bathing.

Warm bathing, in a natural or artificial marine bath, is not liable to all the objections against bathing in the open sea.

This is a remedy, which appears also from Pliny, to have had the suffrage, and to have stood the test of antiquity. It has been revived, and adopted by modern surgeons, who continually experience the inefficacy of the medicines, recommended in scrophulous com-
in which perfect and absolute rest of the limb is necessary, and every attempt to move it injurious, from those which derive advantage from motion. I believe the latter are of much less frequent occurrence than is usually supposed, although it is certain that benefit is sometimes derived from moving the limb where the cause of lameness is exterior to the joint; but when caries, or a disposition to caries, is manifested by elongation and wasting of the limb, I have always seen the disease aggravated by every attempt at motion. E.

plaints; but certainly, there are not yet on record a sufficient number of successful instances of its usefulness, to justify such a decided preference of warm sea bathing, as to exclude the considerations, or supersede the use, of topical applications.

Dr. Charlton, in his treatise on the Bath waters, has given a short account of this disease, and has published a few cases, with a view of ascertaining the utility of warm bathing in this complaint. These cases are much in favour of warm bathing, for which he is an advocate, and his account of the symptoms of the disease is so evidently copied from nature, that it would be an injustice not to transcribe the whole.

Without giving much credit to the mineral impregnation of the Bath waters, as materially useful in this complaint, I had conceived that the benefit, which Dr. Charlton's patients received, might have been just as well derived, merely from an immersion in common warm water. Accordingly I recommended warm bathing in common water, in several cases of

the early stage of the disease of the hip joint, and generally found that my patients were relieved from some of the most painful symptoms, though the relief was not permanent. Nevertheless, I still am of opinion, that the warm bath ought not to be altogether rejected, as it does not much interfere with the use of topical remedies; more especially, that of bleeding by leeches*; and it might at all times be adopted with considerable advantage, previous to the application of blisters, or of the caustic.

Dr. Chariton, after reciting two cases of the disease in the hip joint, cured in the

* It has been remarked, by Dr. Albers of Bremen, in a very useful essay on this disease, that Mr. Ford has rather too strongly insisted on the use of leeches in its first stage. The opinion of Dr. Albers must necessarily have great weight, when we consider the attention he has paid, and the very extensive opportunity he has of informing himself on the subject; for he observes, the disease is so common in Bremen, that one person in fifty is lame in consequence of it. I mentioned this to Mr. Ford, and he said the application of leeches was very useful, and even, sometimes, indispensable, when the pain and tenderness of the joint were violent; but that he did not now use them so frequently, or freely, as formerly; for he found that perfect rest, with occasional blisters, was often adequate to the removal of these symptoms. E.

Bath Hospital, says, that “patients are
“ frequently sent to Bath, whose complaint,
“ in the description given of their cases, is
“ said to be the sciatica, or hip gout. But
“ as the symptoms of their disease are not
“ confined to the idea, which this term con-
“ veys, I shall here enumerate them.”

“ If you enquire of these patients, where
“ their pain is situated? Some will point to
“ the groin; some to the great trochanter of the
“ thigh bone; and others to the junction of
“ the os innominatum with the os sacrum.
“ Temporary pains are also often spoken of
“ in the knee, the shin, and the ankle of the
“ diseased limb. Pain in the acetabulum of
“ the os innominatum, is frequently never
“ mentioned, and many of these patients can
“ bear to have the head of the thigh bone
“ moved round in its socket, without the least
“ uneasiness. The diseased limb is sometimes
“ shorter than the sound one; but it is much
“ more frequently longer; if the buttocks be
“ examined, that of the diseased side will be
“ found lower than that of the well side.

“ I have seen several instances, where *the obtuse process of the os innominatum has been an inch and a half lower than its natural situation.*”

“ This disorder is sometimes brought on by colds, which have been caught by sitting on the damp ground. Sometimes it is the consequence of external injuries, as falls, leaping down from high places, &c. and very often no assignable reason can be given for it. It happens indifferently to persons of all ages and constitutions. I could never discover, after the most careful inquiry, that those of scrophulous habits, were more liable to its attacks than others, who had ever been free from glandular obstructions.”

“ Its approaches are generally made by slow and almost imperceptible degrees. A kind of weariness and inaptitude to motion is at first perceived in the limb; which, in children, has frequently been taken for some trick they had got in walking, till the subsequent pains have, at length, given

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“ but too convincing a proof to the contrary.

“ The miserable patient often long languishes

“ under this cruel disease. His pain grows

“ more continual and more violent. Inflam-

“ mation arises, matter is formed, a hectic

“ succeeds, and he dies tabid. Or, if the ab-

“ scess breaks, or is opened, the flux of

“ matter is usually more than his strength

“ can support, and he sinks under the dis-

“ charge.”

“ Dr. Oliver justly remarks, that, when

“ the case is recent, and the patient young,

“ our waters frequently effect a cure. To

“ which I must add, that when the disease

“ has been of long standing, they seldom do

“ much service, and if the parts are much in-

“ flamed, but particularly if matter is formed,

“ the use of them is highly injurious.”

“ Our usual method of treating such cases

“ is as follows: we do every thing we can to

“ prevent inflammation, or, if it exist, to re-

“ move it. We depend more on the exter-

“ nal, than on the internal use of the waters.

“ And such patients are usually restrained

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“ from drinking them, till the disease begins
“ to give way ; and even then they are pre-
“ scribed in small quantity, and are some-
“ times softened with milk, or cooled with
“ spirit of nitre. We frequently purge such
“ patients, and with advantage. Some of
“ them require, and are benefitted by mercu-
“ rial physic. Bleeding is not omitted, cup-
“ ping of the part is exceedingly serviceable,
“ and emetics are often very useful. All these
“ several evacuations are repeated during a
“ course of bathing, as circumstances de-
“ mand.”

“ When the patient bears bathing well,
“ that is, if his pain is not increased by it, and
“ more particularly if it abates his pain, we
“ reasonably entertain hopes of his recovery.
“ But bathing, though it should considerably
“ lessen the symptoms of the disease, yet it
“ is not always able to perfect its cure. In
“ this case, we have recourse to the pump,
“ and the success answers our wishes. This
“ application, however, must be made with
“ great caution ; and should immediately be

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“ desisted from, if the pain is increased by
 “ it. Under the circumstances of the patient’s
 “ being relieved, though not cured by bathing,
 “ and yet unable to bear the pump, I have
 “ known him receive the greatest advan-
 “ tages from emetics, and the application of
 “ lime cataplasms, sometimes of blisters, to
 “ the diseased parts.”

“ When bathing makes such patients fe-
 “ verish, and increases their pains, no benefit
 “ is to be expected from it ; particularly if
 “ after carefully repeated trials, these effects
 “ are constantly observed. And if they are
 “ sent to us in the last stages of the disease,
 “ when matter is formed in the part, which
 “ too frequently happens, we are obliged to
 “ return them to their homes, as soon as
 “ possible.”

Topical bleedings, blisters, setons, and issues
 come next under consideration, as means
 which have a general tendency to retard the
 progress, and counteract the operation, of a
 strumous affection of the hip joint, in its early
 state.

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Bleeding with leeches has long been found, by experience, a remedy of great efficacy in checking inflammations of external parts, and consequently, is well calculated to prevent the formation of an abscess. It has in modern practice been used with great freedom, and attended with some success, in tumours of a scirrhus tendency and likewise in deep-seated, strumous disorders. Doubtless, whatever has a well-known and powerful influence, in retarding external inflammations, may naturally be supposed, not to be altogether inert, when applied to those parts, which are less superficial.

It is known, however, that in this, and many other scrophulous diseases, the inflammatory diathesis is indolent during its first attack, and is not discoverable by the usual symptoms of acute pain, and fever. On the contrary, the patient frequently appears to be in a low enervated state, with a quick small pulse, and a variety of symptoms indicating the propriety of adopting a tonic rather than an antiphlogistic plan.

It happens also, not unfrequently, that surgical assistance is not solicited on its earliest necessity; the disease being apt in the first instance to be mistaken for rheumatism, or sciatica in adults, and equally liable, at that early period, to be imputed in younger subjects, to indolence, to worms in the intestines, or to accidental contusions of the muscular parts.

From much experience of the good effects of repeated applications of leeches in strumous affections of the knee, and of other joints, I conceive that such a mode of bleeding would be very useful in the beginning of the disease of the hip joint. I even think it might be used, and with great advantage, in a more advanced stage of the disorder, previous to, or in conjunction with, other applications, when the great and principal object is, to prevent an external suppuration.

But although bleeding by leeches, or by scarifications, may often be very useful and always safe, yet it can hardly be thought capable of effecting universally, a complete altera-

tion for the better, in a bone which is already carious, or has at least a manifest strong tendency to become so.

The topical application of blisters is recommended, from general and successful practice, in diseases nearly allied to this of the hip joint. Inflammations in the cavity of the abdomen, and of the thorax, arising either from sudden causes or from stumous affections of the viscera, are known to be relieved by blisters applied over the diseased parts. Their application is undoubtedly serviceable, on the first appearances of morbid disposition in the bones, whether it arises from stumous taint, or accidental injuries.

Caries, or a disposition to caries manifested by a thickened periosteum, and apparent enlargement of the bone, in the clavicle, ulna, radius, tibia, or any of the bones, which lie near the surface of the body, in the joint of the wrist, that of the elbow, and even the knee, is generally relieved, and often cured by the repeated applications of blisters to the affected parts.

In enlargement of the joints of the fingers,

proceeding from a stumous constitution, and in that enlargement caused by external accidents, the beneficial efficacy of blisters, repeatedly applied round the affected part, is incontestible. Under this application, the enlargement obviously subsides, the crepitation between the bones, the consequence of abrasion of the cartilages, ceases to be felt, when the blister begins to operate, the use of the joint is effectually recovered, and ankylosis prevented.

De Haen in his treatise "De Morbo Coxario," affirms it, as a certainty, from his own experience, and that of Boerhaave, that many patients have been relieved in this disease, by the repeated applications of blisters; he regrets however, that every prognostic is doubtful, the utmost uncertainty arising, as he thinks, from the great variety of causes, which may give birth to the disease, and from the diversity of the parts which may be affected.

The real nature of the evil, he says, is absolutely unknown, any farther than as it is

manifested by its effects. As to the seat of the disease, he considers it, as existing in the integuments, in the cellular membrane, the membranous fascia, the muscles, the involucrem of the ischiadic nerve, the periosteum of the bone, the capsular ligament, the cartilages, the bone itself, the glandula innominata, the ligamentum teres, or finally, in all the above mentioned parts together.

In this description, the causes and the consequences of the complaint, are perhaps inaccurately blended together. If the disease originated in the integuments, or in the superficial parts, there is the greatest reason to believe that topical bleedings, and blisters, would accomplish an effectual cure. But to judge in this case from anatomical reasonings, drawn from diseases where the effects of external treatment are more obvious to our senses, there appear to be many, and great objections against our adopting the opinion of De Haen on the hip disease, as perfectly just, and satisfactory.

There is an insuperable difficulty in our

conceiving, on the one hand, that the matter formed either in, or near the cellular membrane, should force its way inward through strong ligaments and tendon, to destroy the joint, instead of pushing outward, as is well known to do invariably, in all other parts, where strong ligamentous, or bony compages do not intervene to resist and frustrate its external appearance. Whereas, on the other hand, there is the greatest facility in explaining satisfactorily, the suppuration. If this principle be rejected, those important symptoms of this disease must still remain unexplained, or inexplicable. But it may be recollected here, that this assumed principle has been considered as a fact, apparently well founded, and ascertained by intuition in the case before related.

The application of blisters to the hip is, no doubt, very serviceable in the earlier stages of its disease; it has even been known to produce cures, and will generally, in that state of the complaint, suspend a disposition to caries in the bone. Nevertheless it is still a point of great doubtfulness, whether this ap-

plication alone may be securely relied upon, for such an effectual cure of the disease, as will to a certainty prevent its return.

The propriety, and efficacy of such an application in cases of diseased bones, which lie near the surface of the body, cannot be controverted; but it must be confessed at the same time, that an application of this nature, may not be equally beneficial, when the diseased bone, or the morbid affection is more remote from the surface, and consequently, not so immediately subjected to the action and power of blisters.

It may be alledged indeed, that the amplitude of the surface irritated, and the copiousness of the discharge proceeding from an extensive sore, may well be supposed to compensate in some measure for the distance of the blister from the affected part. After allowing to this argument its full force, and admitting, that even in many unpromising cases, blistering may be very beneficial, especially when favoured by the constitution and habits of the patients; still it is conceived, that this ap-

plication cannot be considered as fully adequate to the entire removal of such deep-seated diseases as lameness, from caries of the cotyloid cavity of the hip joint, or incurvation of the spine, from caries of the vertebrae.

Various stimulating plaisters and cataplasms have been recommended by many medical writers, for the relief of this complaint, and the practice is evidently founded on the same rational principles as the application of blisters, with similar intentions. For my own part, I have not had much personal experience of their efficacy, nor do I know that they have lately been much employed in this country, in the treatment of this disease. They are however recommended on good authorities, and merit more extensive trial.

De Haen very candidly relates the case of a patient labouring under the hip disease, whom he acknowledges to have teased with a repetition of blisters. The patient left him by no means cured, but was afterwards relieved by an old woman, who applied a plaister

over the whole thigh. It was a composition of gura mastich, powdered and formed with rectified spirit of wine into the consistence of a plaister. Availing himself of this hint, De Haen afterwards used, in several instances of this disease, a composition of quick lime, mixed with honey.

Ætius, Paulus Ægineta, and Shenckius, recommend stimulating plaisters for the same purpose. Certainly it is not unreasonable to suppose, that a permanent irritation kept over the diseased parts may often be more efficacious than a blister, the irritation of which is only temporary, with a purulent discharge very variable.

Of all the known applications of this nature, the most powerful seems to be the following plaister, recommended by Dr. Swedjar, Lond. Med. Journ. Vol. I. p. 198.

R Gumm. Ammoniac. ʒj.
Aceti. facillitic. q. s. ut fiat Emplastrum.
Quo pars affecta tegatur.

I have found this plaister, which by sprinkling it with powdered squills, is easily rendered

more irritating than is here prescribed, useful, as a topical remedy, in some scrophulous affections; but in the hip disease, it has not hitherto answered my expectations.

A practice has been lately revived, and is at present very generally pursued, for the relief of the complaint under consideration, which consists chiefly in making a large issue, by caustic, near the part affected. It is adopted on the recommendation, and warranted by the experience, of very celebrated medical writers, and has in its favour the frequent good effects which issues made in this manner are known to produce in diseases similar to this of the hip joint.

The principal object in the earliest stages of this complaint is, to remedy a caries, or to stop that disposition to caries, which, if not checked during its advancement, has a necessary tendency to destroy not only the joint, and the limb, but likewise the life of the patient.

Even in the subsequent period of this disease, when the caries so visibly manifests its existence, that there can be no farther doubt

about its having taken place, when the thigh bone is shortened, and the most unfavourable symptoms shew, that the affected parts are hastening rapidly to complete destruction, it is of the utmost consequence to the patient, to adopt a practice, which is likely to favour the quiet formation of ankylosis, and prevent the disturbance and obstruction, to which that process would unavoidably be exposed, by an external suppuration.

That these ends may be answered, and the happiest effect in this way produced, by means of an artificial drain, or an irritation excited near the diseased bone, is obvious from the general action of blisters on bones in a morbid state, and may be farther credited from the numerous observations, which may be collected from the writings of the most able practitioners, since the time of Hippocrates, to that of Mr. Pott, who seems to have ascertained it beyond the possibility of doubt in his treatise on the incurvation of the spine from caries.

Inquiries after remedies, from the writers

of antiquity, are not generally rewarded with many valuable acquisitions. The descriptions which they give of diseases, are acknowledged to be for the most part faithful and accurate, but there is not always equal good reason to praise the felicity of their methods of cure; nor can the moderns boast with truth of being so happy as to have surpassed them very far in curing this disease of the hip joint.

In the modern treatment, the most rational, and beneficial plans, are derived from the ancients, and are principally to be ascribed to their skill, and ingenuity. The practice of sea bathing, both warm and cold, of topical bleeding, of stimulating the surface by blisters or other irritating applications, and of making topical issues by caustic, bear honourable testimony to the accurate and clinical observations of the great fathers of physic, and surgery, of whom it is difficult, if not impossible to think, without an immediate recollection of Hippocrates, from whose wonderful penetration and sagacity hardly any thing, which

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affects the health of man, seems to have entirely escaped.

To the vast stores of medical knowledge which he possessed, his comprehensive mind appears to have been in the habitual exercise of adding, from every circumstance of a pathological nature, which came under his extensive, and acute observation. It would be vain to alledge, that he has not been surpassed in anatomical knowledge; but all his writings, and especially his aphorisms, "*quos jam senex et cognitior composuit,*" afford throughout the most striking evidences of a superior and accurate knowledge of the various diseases, to which the human frame is liable.

At the conclusion of the sixth section of that admirable work, there are two aphorisms relative to the hip disease, which are worthy of a more full and critical account, than can be given in a work of this nature, or properly inserted as notes below; I must therefore refer to an appendix on this subject, contain-

ing a few remarks with which I was favoured by a literary friend.

To explain and justify the variation from the first edition in this and some following pages, it is necessary the reader should be acquainted with the circumstances that have occasioned them. The Editor is therefore obliged to make a considerable addition here, as he is persuaded the author must and would have done, had he lived to republish his work.

About two years ago, Mr. Bryan Crowther, Member of the Royal College of Surgeons in London, and Surgeon to Bridewell and Bethlem Hospitals, published a book on "The Disease of the Joints, &c. commonly called White Swelling, &c." In page 257, he refers to this work, and speaks of it in the following very respectful manner.

"On the hip affection I have great satisfaction in referring the reader to the excellent observations of Mr. FORD, which will furnish the requisite practical information on this very important subject. By thus point-

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 “ing out a source of more copious instruction, I conceive that I apologize sufficiently for the small number and desultory nature of my own observations.”

This author farther indulges his satisfaction, and enhances his compliments to Mr. Ford, by taking a plate or two from his book, for the benefit and embellishment of his own; giving thus, though tacitly, an unsuspecting testimony that he held this work in high estimation. Notwithstanding this, doubtless, he was still at liberty to censure, as well as to commend; and had an unquestionable right to remark with freedom and candour on what he thought reprehensible in it.

But surely it appears to be an ungracious return for an obligation, and rather bordering on unthankfulness for the great satisfaction it had afforded him, to animadvert with unbecoming warmth, and a degree of asperity that the occasion did not call for, on the translations of the two aphorisms given in this place of the former edition, and on the remarks in support of them, in its appendix.

Certainly the animadversions might have been made more pleasant, without making them less forcible; and as they might have been softened without injury, they might too have been shortened with advantage to his argument; no good end whatever could have been frustrated, either by proper politure, or judicious curtailment; and while Mr. Crowther studied to write *fortiter in re*, he needed not to have deviated from the good old rule of writing *suaviter in modo*.

The reader, after getting through thirteen pages of these animadversions will most probably join with Mr. Crowther in the propriety of the following observation. "It may be objected, that more has been said with respect to these aphorisms, than in a practical sense, they may seem to deserve." Nevertheless, though he had declared, three pages before, "that it was really painful to his feelings to advert again to these aphorisms," he adds, after all, a note of full four pages

more, of much closer printing, and in much smaller type, on this pain-giving subject.

Mr. Ford, to hasten the republication that has eventually devolved upon me, prevailed on the friend abovementioned to take these animadversions into his consideration, and very soon after he received from him the result of his examination. In this MS, dated March 11, 1808, with a view of shortening disagreeable disputations, he states very particularly what he wishes to be, either altered in the text, or added in the appendix of this second edition.

Here he wishes it to be noticed, that, in what sense soever they have been interpreted, the aphorisms mentioned in this place clearly answer the purpose of Mr. Ford's reference to them, and effectually justify the fairness of his inference from them. They establish, beyond denial or dispute, the doctrine of this book on the venerable authority of the Father of Medicine, and prove, what they are quoted to prove, that the mode of remedying the disease this book treats of, approved and recom-

mended by Mr Ford, was adopted and practised by Hippocrates.

It does not affect the propriety of the reference here to these aphorisms, or the justness of the inference deduced from them; whether the word ἐξίσταται be translated *exstat*, or *excidit*, “stands out”, or “falls out”; or whether the words ἐμπιπτει ὡαλιῶν be interpreted *incidit retro*, “falls in behind,” or *incidit iterum* “falls in again;” nor whether μύξαι be translated “matter or mucuses,” pus or mucus.

So long as the last word of the last aphorism, remains unquestioned and unquestionable, so long as καθῶσιν “cauterized” cannot be got rid of, as spurious, or an interpolation, it cannot possibly be denied, that the celebrated physician, who reckoned himself the seventeenth in a lineal descent from Æsculapius, and who lived about 400 years before the Christian æra, under the name of Hippocrates, was perfectly “sensible of the great use of issues made by caustic, towards effecting the cure of the diseased hip joint

“ and treated this complaint in a mode similar to what is now practised.”

The editor, who now sees he shall have but little, if any farther occasion, to deviate from the text of the first edition, excepting in the appendix to it, shall give here a faithful translation only in plain English, of the two aphorisms properly referred to in this place. It conveys, indeed, with but little difference, the very same meaning as the former interpretation; but it is expressed in a simpler and shorter way, and the result of reconsideration; most evidently with a sincere desire of rendering it less liable to the dislike of Mr. Crowther, and more acceptable to his learned friend.

With the copper-plates, and all the notes prepared for a new edition, the translator's MS was very obligingly presented to me by my uncle's relict. Mr. Ford had made no alteration in it, long as it had been in his possession, although, for all his modesty, he was far from being unskilled in the original text.

Even with respect to the more loose and liberal translations, of which Mr. Crowther

says, (*horeſco referens*) “that in his mind,
“ they implied a charge of professional igno-
“ rance, want of ſenſe, and incapacity of pre-
“ diction againſt Hippocrates,”* Mr. Ford
affirms, that they ſtated that venerable phy-
ſician’s doctrine in a way very “ clear, and
“ comprehenſible to thoſe who are converſant
“ with the diſeaſe, by the appearances of
“ which, he conceived himſelf authorized to
“ ſay that the interpretation was ſupported.”†

The tranſlations being now made more li-
teral, are rendered leſs exceptionable; moſt of
the objections to them are no longer appli-
cable, and they ſeem, in their more ſimple
and concise forms, leſs diſſimilar to the ſtyle
and manner of Hippocrates.

In conſideration of this, and for the reaſons
above-mentioned, the editor is perſuaded that
the author in his intended republication, had
determined to adhere ſtrictly to the reconſi-
dered interpretation of his friend, and to have

* See Mr. Crowther’s book on the Diſeaſe of the Joints,
&c. p. 287.

† See the firſt edition of this work, pages 63 and 64

given it, and the additional arguments in its support, as I shall do both here and in the appendix, in the *ipsissima verba* of his friend.

By the rejection of every thing hypothetical, and the substitution of plainer words in the stead of technical terms, an interpretation of the very same meaning with that in the preceding edition, seems to be expressed with equal clearness, and more precision, insomuch, that it appears to have left no good ground for entering into more learned logomachies.

Hippocratis "Aphorismi." Sect. VI.

Aph. 59. " In such as labour long under
" the hip disease, the hip bone stands out
" before, there is a falling in behind, in
" them matter supervenes."

Aph. 60. " In such as labour longer under
" disease of the hip, the hip bone stands
" out, the limb wastes, and they become
" cripples if they be not cauterized."

It is evident, *prima facie*, that these two aphorisms refer to two different periods of the hip disease, and that the sixtieth is supplementary to the fifty-ninth. It is almost equally superfluous to observe, that although the former obviously bears on the subject of this book, and merits due consideration; it is the latter however that is more immediately pertinent to this particular part of it, where the author is speaking of the use and benefit of issues made by caustics.

Need the editor say, or apologize for his saying, that, on mature consideration, the preceding new version of both aphorisms further illustrated and confirmed as it is in the sequel, appears to him, as it did to Mr. Ford, more eligible and satisfactory than any of the interpretations whether in Latin or in English, which, however various, are not essentially different from each other. They shall be given, as before, faithfully, with the addition of one or two more, in the appendix, and submitted fairly to the judgment, and freely to the choice of the reader.

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Should the version adopted here, be rejected merely for its novelty, or be still thought too general, or too concise, or not sufficiently warranted, as the true meaning of the originals, to use the modest language of the author, " I shall not pretend to defend it by assuming an air of critical skill in Greek literature, but refer the reader to the remarks in the appendix, and the additional reasons there assigned by the translator, both for his going so far, and for his not going any farther from the version given in the foregoing edition.

The editor has now done, what he knows would have been done by the author, had he lived to see his intended new edition through the press; and, has, as briefly as possible, communicated the information judged requisite to explain, and justify the variations from the first publication of this work.

The reader will therefore be pleased to observe, that he is now entering again into the sequel of Mr. Ford's argument, who, after a proper reference to these aphorisms of Hippocrates and a just inference from them,

proceeds next to consider the practice of his commentator, with respect to issues made by caustics.

Galen, in his commentary on these aphorisms, maintains the meaning of Hippocrates to be, that an external wound should be made by cautery to prevent the subsequent evils of the malady. There are besides, two other passages, in the writings of Hippocrates, which, if taken in conjunction with the preceding aphorisms, seem to imply that a cautery, in his opinion, ought to be used early in the disease of the hip joint, to prevent supuration. The same passages suggest a very probable conjecture, that Hippocrates, in his own mind, ascribed a want of success in the cases of Hecason and Cyrenius, two patients afflicted with the hip disease, to the omission of the cautery, in an early period of the distemper*.

* Hippocratis lib. Epidem. V. pag. 341. Edit. Charterii.

Ejusdem lib. De internis Affectionibus, tom. 7, pag. 677, Edit. Charterii.

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Celsus prescribes the use of the cautery, in the treatment of the hip disease, and directs the mode of performing the operation. He orders the hip joint to be cauterized in three or four places, and advises the ulcers not to be healed up, but to be kept open, until the complaint is removed.*

Paulus Ægineta likewise†, and Ætius‡ recommend the cautery, in this complaint, as do also various authors of more modern date. Prosper Alpinus,§ and Ambrose Parey,|| ought to be particularly mentioned as advocates for this practice, and Schenckius¶ tells of a physician, who acquired reputation from curing it by caustic, but he does not mention his mode of applying it, and says only, that the wound should be kept open for six months.

In still more modern practice, we find the illustrious Boerhaave, and De Haen, prescrib-

* Celsi Opera. lib. IV. cap. 22.

† Pauli Æginetæ Opera, lib. VI. cap. 76.

‡ Ætii Basil. Edit. p. 640.

§ P. Alpinus, De Medicina Ægyptiorum, lib. III. cap. 12.

|| Amb. Paræy. lib. XVII. cap. 23.

¶ Schenckii Observat. lib. V. pag. 673.

ing topical issues for the hip disease. The former with great confidence recommends this mode of treatment, as will appear from the following quotation: "Sumatur cauterium valde ignitum, cum annulo, a quo annulo profunditas inuersionis determinatur, et hoc applicatur coxendici hac ratione omnes hi Ægri curantur, et puto, quod si hæc methodus semper in hoc casu esset adhibita, ex centum hominibus, qui nunc claudicant, non unus claudicaret*." *Praxis Medica, pars V. pag. 380.*

* It is really "somewhat extraordinary," that with this passage faithfully quoted in Mr. Ford's work, with which he was doubtless conversant, before the publication of his own pamphlet, Dr. Falconer should affirm, as he does, pages 48 and 49, that "neither Boerhaave, nor Van Swieten give any description of it, (the hip case) nor suggest any remedies or indications of cure worth repeating, and that they both had confounded this disease with rheumatism and sciatica, with which it has little or no connexion," &c.

Until the passage quoted above shall be proved spurious, it is not easy to conceive, how it can be well said, that the illustrious Boerhaave had not suggested any remedy for the complaint in question, worth repeating. Boerhaave's commentator too, has given a description of a hip disease abridged from a long narrative of a curious case by La Motte in his "Traité complet de Chirurgie," Tome IV. p. 367, and seq. which it seems very difficult to believe that Van Swieten could confound with rheumatism, or sciatica, with

Cheston, in his pathological inquiries, mentions caustics with approbation, and recommends their use, for the white swelling in the knee, a disease similar to this of the hip joint.

Kirkland likewise, relates an instance of a complete cure of a disease of the knee joint, under the direction of a farrier, who effected

either of which it seems to have little or no connexion, and from which it appears to be clearly distinguished.

Moreover, with respect to M. de Haen, who, he says, has left a treatise of 38 pages, "de Morbo Coxario," Dr Falconer even doubts, "if he was properly acquainted with the disease as distinct from rheumatism, sciatica, and the effects of external violence." The Dr. indeed acknowledges that "Van Swieten appears to have borrowed some information on the subject from Cotunnus," but of what Van Swieten borrowed from Cotunnus, he makes no more mention than he does of what he himself has borrowed from the preceding edition of Mr. Ford's observations.

Van Swieten however has given a more accurate description of the hip disease, than any of his predecessors, and still farther, to show that he distinguished it from every other complaint with which it might be confounded, it is very observable that he has, with the nicest discrimination, selected from the long statement that La Motte has given of the case, just such circumstances only, as have an immediate relation to the disease. Rejecting much the greatest part of the long narrative of the French author, he takes particular notice of the elongated limb, of its subsequent abbreviation, peculiarly characteristic of the hip disease, of the formation of abscess, and of the final cure by anchylosis. E.

it by means of a caustic, which penetrated no deeper than the skin.

To recur to the veterinary art, it may be recollected that Bracken, a well-known writer, and an attentive observer of facts, remarks, that he had seen instances of the good effects of cauterising, in the diseases of joints of the human body. He particularly takes notice of a cure of this kind, performed by a travelling empiric, in the mode recommended by the ancients, of laying on caustics in so great a number, that he found ten at one time on the patient; the application however was useful, and the event finally successful.

But it is not on the basis of authorities, however numerous, that the reputation of a remedy can be permanently established; experience must justify its preference. The inefficacy of other means has long induced me to give the caustic an extensive trial in diseases of joints. The result of my experiments confirms me in a favourable opinion of it; and I am well persuaded, that many sufferers from this disease, have recovered the

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entire use of their limb, by having had a large issue on the hip; who would otherwise have been exposed to the risk of a tedious illness, almost inevitably terminating in death, or anchylosis of the joint.

In the course of the present observations, it is not intended to state particularly the manner, in which blisters or issues operate, but merely to consider, if they are, in any way of acting, capable of producing beneficial effects. It has been suggested, that the application of issues to the back, for the disease of the carious spine, does not in reality contribute to the cure, but that it is produced eventually by nature alone.

It has likewise been doubted, whether the continued purulent drain from the issue has any good effect; as it is said, that all the advantage, derived from this practice, proceeds from the simple irritation of the caustic. If objections of this kind are of force against its use in the carious, incurvated spine, they will be found equally valid, against using this application in the disease of the hip joint.

To the first objection, namely, that an issue well made, and managed with judgment, does not avail in the cure of the diseased spine, it may be answered, that numerous cases are on record, which shew that patients, with incurvated spine from caries, have recovered under such treatment; but this is not altogether conclusive, as there are undoubtedly instances of its failure.

If the mode of cure is attempted to be explained, it may be more satisfactory to say, that an external suppuration, when it takes place in the carious hip joint, or in the carious incurvated spine, almost invariably debilitates the habit, lengthens out the disease, and thereby prevents the powers of the constitution from affecting that union in the diseased parts, known by the name of ankylosis. Daily experience shews, that blisters have a power of checking the progress to suppuration in parts affected, near the surface of the body, and that issues, made by caustic, have a similar influence in complaints more deeply seated; and, if they have that power, they must

necessarily assist in the greatest object, requisite to the cure of this disease, which is the prevention of an external wound's communication with diseased bone; for few patients die of this complaint, unless they are subjected to that unfortunate symptom.

It has been said also, that the continued discharge of matter, from an artificial wound, made near the diseased part, is not of itself advantageous to the disease in question, but that the whole, or the principal benefit, is derived from the irritation; nor is this argument without foundation; for in the hip disease, the patients often find a remission of their hectic symptoms, and of their local pains, so immediately after the application of the caustic, and so long before it can produce any purulent discharge, that it is impossible to consider the new irritation made by the caustic as unimportant, in the cure. But if irritation be an essential and an useful part of the surgical treatment, in what more convenient form can this process be kept up, than by a large wound made by caustic, near

the part affected, and frequently sprinkled with finely powdered cantharides ?

In the disease of the hip joint, as well as in the diseased spine, the progress of cure is often slow, and uncertain, a considerable length of time frequently elapsing before symptoms of convalescence appear. Under such circumstances, if irritation contribute towards procuring this convalescence, I think it might be proper in some cases to renew it, which may be done by recurring to the practice of the ancients, in the application of the caustic to several fresh places, as near the seat of the disease as possible.

The choice of the part to which the caustic should be applied is of the utmost importance. In the carious incurvation of the spine, the most proper place obviously presents itself, where the external convexity points out the internal malady. But in the hip joint, it is not easy to fix on a situation, which does not interfere with the action of the muscles, or which might not be inconvenient to the patient, in the various positions of the body ;

and at the same time it is necessary, that the issue be made, where it may have the most immediate, and direct influence on the diseased part.

The hip joint is surrounded by large muscles, on the posterior part, which would necessarily prevent an external irritation from acting on the part most affected; the frequent action also of these muscles in the motion of the joint would baffle every attempt of the surgeon, to keep the wound open by peas, or by any other means that he should adopt for that purpose.

The situation of muscles, nerves, and blood vessels, belonging to the lower extremities, is an insuperable objection to the application of a caustic in the anterior part of the joint, sufficiently deep or large to check the formation of matter.

The outside of the thigh, in the hollow, parallel with, and a little behind, the great trochanter, affords a proper place to make the issue. Here the peas are not likely to be expelled by the action of the muscles em-

ployed in moving the joint, nor does a wound in this part, much incommode the various functions of the body, in sitting, walking, or lying down. It is sufficiently contiguous to the diseased part, as the common integuments are almost the only intermediate substances between the capsular ligament, and the external fore.

With regard to the mode of applying the caustic, it may be done in a way different from that, recommended by Mr. Pott, equally efficacious, but less painful. The laying on a caustic, and suffering it to remain on the part for several hours, gives a great degree of uneasiness, and much unnecessary terror; and if a method can be adopted, which gives less pain, or even apprehension of pain, it will always deserve the preference. The experience of every surgeon must convince him, how necessary it is, to use the most gentle means of curing diseases, which our art can devise, without defeating its purposes.

The operations of surgery, are in general dreadful to the apprehension, and painful to

the sense; and particularly, the timorous patient, whose nervous sensibility is quickened exceedingly, by the continual influence of a chronic disorder, shudders at the thoughts of caustics and cauteries. Perhaps one of the best, and most efficacious remedies, which in many cases, surgery administers to the unfortunate, was early exploded, from the terror which the mode of performing the operation, and the tremendous instruments, and apparatus for the occasion, tended to create.

The practice of the Greek surgeons in using the actual cautery, and of the Indians in using the moxa, for chronic affections of the joints, and viscera, has been so long diffused in this country, that the present mode of applying caustics, in the very same, or similar cases, wears such an appearance of absolute novelty, as to pass for an entire modern invention, instead of being considered as only a variation of old notions, and mere improvement of ancient practice.

If it be certain that the practice here spoken of, was ever attended with any ad-

vantage, and merits continuance for the good it produces—if the present mode of laying on a caustic over a strumous disease of the bones, or other parts, is still to be considered as beneficial, it is fit it should be known, that it may be pursued in a mode, more simple, more effectual, and expeditious; less painful, and less liable to excite apprehension of pain, by means of the septic stone.

If this preparation be merely pencilled or rubbed on the part, where the issue is to be made, it will at all times effect as much as could be done by the actual cautery, by the moxa, or by laying on the caustic paste, and suffering it to remain on the part for several hours. This operation gives little, if any terror to the patient, and never produces that intensity, or continuance of pain, which usually accompanies the application of a caustic in the common manner, and it will always, under judicious management, accomplish, with advantage and certainty, every object which is to be effected by caustic.

The sensibility of pain is certainly not the same in all subjects; for many persons bear the application of caustics with much less uneasiness than others; but, in general, the operation of rubbing the caustic stone on the integuments is so little painful, where they are not inflamed, that the patients often doubt of its capability of producing an eschar. If the skin be strained, during this mode of applying the caustic stone, the eschar is sooner produced, but at the same time, more pain is created. If it be intended that the eschar should penerate deep into the cellular membrane, the friction should be continued, till the integuments give way under its action; but, in general, for the purpose of making an issue, it is sufficient to rub the septic stone, or lapis infernalis, as it is called, on the part intended to be affected, until the skin begins to change from its natural colour, to a brownish hue, which appearance it first exhibits, where the roots of the hair proceed from the cuticle.

In this method of making an issue, as in

the common method of applying the caustic, a space of time, generally of twelve, or fourteen days elapses, before the separation of the eschar takes place, so as to admit an introduction of the common white peas, which appear to me, better adapted for making, and sustaining the cavity of the issue, than the beans usually employed for that purpose.

In the management of this artificial wound, it may be observed, that it is liable sometimes to become a painful and irritable sore, at the first introduction of the peas; whilst this disposition subsists, the peas may be entirely omitted, and the wound dressed with spermaceti ointment; when the irritability is gone off, the usual dressing for an issue may be applied*.

A seton has not, in my experience, been so effectual in removing this disease, as an

* For further observations, on this method of using the lapis infernalis, see Howard's Treatise on the Venereal Disease, vol. II. p. 172; a Treatise on the Hydrocele by the same author, p. 47; and Dease's Observations on the Hydrocele, p. 10.

issue made by caustic ; nor has the discharge been equally copious. Whilst I was in the habit of employing it, the suppurative state of the hip joint came on more rapidly, and more certainly, than in those cases, wherein I used the caustic. It is needless to insist on the necessity of a large opening, to suspend, or to remove the suppurative progress ; a small issue, with two or three peas, gives just as much trouble as a larger one. One of the most rapid progresses towards recovery, which I ever saw in the diseased spine, was in a case, where the caustic was carelessly applied, and suffered to extend into a large sore, which penetrated so very deep, as almost to denude the vertebræ. I generally make the issue of an oval form, one inch in length, and rather more than half an inch in breadth,

* Notwithstanding what is said above of the inefficacy of a seton in the removal of this disease, as I happen to know it with perfect certainty, I conceive it right to state here, that the author very soon after the publication of the first edition, thought much more favourably of its usefulness, and in the course of the last ten or twelve years of his practice, was in the habit of employing setons instead of issues made by caustic. By repeated and re-repeated experience he discovered considerable advantages in the employment of it, especially when

which will be capable of containing about twelve, or fourteen peas.

the patients were kept in a state of quietude. If accompanied with perfect rest, he found the seton was even capable of producing all the benefit which is derived from the drain established by caustic.

He had recourse to the seton the rather, and the oftner, as with respect to the remedy preferably recommended in the text, he experienced frequently considerable difficulty in the management of the issue, when the patient was removed from the immediate care of the surgeon, into the country, or to the sea side; sometimes the issue was suffered to heal up, and at other times it was so diminished in size as to become almost useless, E.

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SECT. III.

Of Abscesses in General.

IN the foregoing sections, the early stage of the disease of the hip joint, has been principally attended to; a local caries has been considered, as actually existing in a state of advancement, or a disposition to scrophulous caries, is presumed to have already taken place. But this real caries, or disposition to it, has hitherto been supposed to be prevalent only in a curable degree, and by no means so predominant, as to have totally destroyed, or even irreparably injured, the cartilage of the head of the thigh bone, or that of the cotyloid cavity.

It has been uniformly admitted, that the complaint is capable of being remedied, so as to preserve the motion of the joint. But when this disease has remained for some time,

a new train of symptoms succeed, very different from the former, and these are allowed in the concurring opinions of all writers on the subject, and are known from the experience of every surgical practitioner, to end in ankylosis of the joint, or in death. Previous however to its termination, the disorder usually appears, in the form of an abscess, or collection of fluid, surrounding the hip joint, and projecting usually on the outside of the thigh, below the great trochanter.

This abscess does not advantageously admit of the treatment, generally adopted for those more superficial, namely, that of opening it by incision, or by caustic. But as the complaint now presents itself externally, under the form of an abscess, a symptom for which surgical assistance is invariably solicited, and as abscesses have been generally subjected to the knife, or to the caustic, it may not be improper to consider, whether the indiscriminate adoption of the principle of opening abscesses, even in their most simple state, rests upon the solid basis of scientific surgery.

It becomes the more essential to consider it here, as the collection of matter, originating from disease in the hip joint is, in some instances, liable to be mistaken for a common abscess. Symptoms do not always, even at the time when it becomes most prominent, indicate to a certainty, the real source of the disease; it may therefore deceive an inexperienced observer, unless the antecedent symptoms have been carefully adverted to.

The general idea of a common abscess, seems to be a collection of matter, preceded by inflammation; the formation of this fluid called pus, has been said to be necessarily connected with erosion of the solids; and the matter thus collected, has been supposed to have a corrosive effect on the circumjacent parts. Nevertheless, it is alledged by more modern physiologists, that pus, in its natural state unmixed with heterogeneous matter, is a bland, innoxious fluid, secreted from an inflamed surface; and this opinion is supported by experiments, which shew that matter, whether collected from the inflamed surface of a

mucous membrane, or issuing from the free discharge of an open ulcer, is not dissimilar, in its chemical analysis, to other secretions of the human body, universally allowed to be specifically harmless. The necessity of entering minutely into the distinct properties of pus, and mucus, as leading to any great and obvious advantage in the practice of surgery, is by no means evident to my mind. I question this the rather, as a fact most important in pathology is proved by daily experience; namely, that this fluid, whether termed pus, or mucus, is capable of being absorbed into the circulation, without any inconvenience to the parts, on which it has been deposited; and of leaving them, when the absorption has taken place, in a state, still proper to resume their local functions.

But however true, or untrue; this opinion may be, it is certain, that the imagined, and very questionable bad quality of this fluid, when considered as necessarily connected with erosion of solid parts, or represented, as the efficient and primary cause of such ero-

sion, has materially influenced the practice of surgery in the treatment of abscesses.

It is obvious to see, that this complex notion of matter, ill founded as it possibly may be, naturally leads to the necessity, and would therefore justify the propriety, of opening abscesses in every method. For, if it were certain, that matter was a fluid destructive to solid parts, a fluid in which an erosive quality was inherent, and from which it was so inseparable, as to be even capable of vitiating the whole constitution, when absorbed, it would undoubtedly be proper, and indeed necessary, to make incisions in every case where it was collected, and into every cavity where it was lodged. It would, in short be requisite to pursue with the knife, this corrosive poison through every sinus, in order to evacuate it entirely, and leave nothing finally for nature to effect, but the slow restoration of continuity in parts, separated as the various exigences required, and divided with all the precision of surgical art.

In investigating however, the general pro-

gress of an abscess, it must be noticed, that the inflammation or morbid alteration of the solid parts, is most commonly a primary appearance ; and that the formation of matter is a secondary symptom, subsequent to the real disease. This is very apparent when an abscess happens to be formed near the surface of the body, in parts liable to great irritability ; and it is deducible from symptoms, when the inflammation, or morbid disposition is deeper seated, and operates on less irritable parts. The opening into these cavities which contain matter, has, probably, no farther tendency to restore to a healthy state those parts on which the matter was deposited, than merely by removing the pressure of an extraneous substance. The progress of disease is more easily checked, when the admission of external air is prevented ; for who has not seen the fatal consequences of opening abscesses of joints, and the quick transition of a strumous indisposition of bone, cartilage, or ligament, from a curable, to an incurable caries ?

The opening of abscesses has been always considered, as an important part of operative surgery. In Mr. Sharp's introduction to his surgical operations, in Mr. Bromfield's and Mr. Bell's later treatises on surgery, several rules are laid down on this subject, and the methods of opening these tumours, by simple incision, by excision of part of the integuments, and by caustic, are amply discussed. But the practitioner, who forms his opinion on this subject, from any of these treatises, without observing the complete progress of abscesses, uncontrolled by surgical treatment, will naturally be led to consider all abscesses, as proper to be subjected to a surgical operation, little notice being taken of those, which may safely be left to the more gentle expedient, of being suffered to break spontaneously.

In the earlier part of my life, I was frequently a witness to the opening of abscesses in every part of the body, with a free incision as it was then called, and often have seen large portions of the loose edges of the cavity,

removed sometimes by the knife, as recommended by Mr. Sharp, but more frequently by the crooked scissars, an instrument calculated to conceal the want of dexterity in the operator, but by no means adapted to the performance of such an operation with the greatest ease, or all the advantage possible.

Painful as this process is at any rate, although executed in the most skilful manner, it is particularly repugnant to humanity, if it be considered, as not absolutely necessary. It leads moreover to a treatment equally unnatural, for the cavity of the abscess is perhaps filled up with dry lint, an application intended by its pressure, to produce the effect of restraining the hæmorrhage caused by the incision, but this mode of treating the wound, by dilating vascular, and irritated parts, often brings on a symptomatic fever; and sometimes also, that very flux of blood, which the insertion of lint was meant to prevent.

A method apparently more gentle, has been since adopted. Surgeons have contented themselves with making a simple, but a large

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incision into the cavity of the abscess, having found by experience, that it is not necessary the loose edges of the wound should be removed, as they are capable of being united to the subjacent parts. To this mode of operation has succeeded, that of opening of abscesses by caustic, and by seton, recommended as less painful means of discharging the fluid.

The opening of abscesses by caustic, is an expedient used frequently, when the patient will not, from timidity, admit of a cutting instrument; but the caustic is a painful substitute. If the skin be inflamed, the additional pain of the caustic will be exquisitely severe, and it would be far better to bear for a time, a pain which may be alleviated by opiates, than to suffer the torture of cutting, or of burning an inflamed surface. When the integuments are not inflamed, the pain of the abscess is bearable, the opening it therefore in any way, seems to be a practice founded on the false idea that matter, whether it be called pus, or mucus, is specifically injurious to the parts on which it has been deposited.

It has been said, that abscesses, connected with indurated lymphatic glands, should be opened in this manner, the action of the caustic being supposed to assist in subduing the enlargement of the gland. This method is very commonly taken in such cases, and speaking from my own experience, I must say that it is sometimes successful, but it has generally proved tedious. When the gland remains indurated, as it frequently does for a long time after the application of the caustic, the surgeon is obliged to have recourse to the lapis infernalis, the red precipitate of mercury, or some escharotic application to subdue it. But, where this kind of abscess has been suffered to burst of itself, and the general remedies have been used in the mean time for the particular disease from whence it originated, whether it has been strumous, or venereal, the indurated gland has been generally found to diminish in less time, and certainly with less pain, and much less deformity of scar.

The opening of abscesses by seton, is also

for the most part unnecessary. I venture to affirm, that the largest abscesses have been more successfully treated by a small counter-opening, made in some depending part of the tumour, without the intervention of the seton, than where a communication has been kept open, by an irritating substance lodged in the cavity of the abscess itself. Even this opening and counteropening is most commonly unnecessary, a more simple treatment being generally successful. The most disagreeable circumstance likely to occur in the spontaneous bursting out of matter from an abscess, is a fresh accumulation in its cavity: but this second abscess is almost always inconsiderable, much less troublesome than the first, and generally completes the cure.

It may also be urged, that the indiscriminate opening of abscesses is not only objectionable, because it is often unnecessary, and always painful; but there are also positive evils attendant on the operation itself, against which no caution or skill in the operator can be always secure; for the pain, and irritabili-

ty of the part produced by incision, will at times occasion violent inflammation and fever; and in some constitutions, a spreading phagedenic ulcer has been the consequence of this artificial opening. *

Veneral and scrophulous abscesses are particularly liable to this calamity. The slightest wound of the skin, even that occasioned by phlebotomy, by inoculation for the small pox, has been known, under some circumstances, to produce the most fatal effects.

To suffer matter, contained in abscesses, to discharge itself spontaneously, seems to be consentaneous to the usual operation of nature in curing of diseases of this kind. It is generally the most easy to the patient, and the cure is more certainly and speedily effected. In this natural way, an unnecessary exposure to air, of parts unaccustomed to its influence, is avoided; the contact of extraneous substances, frequently applied to an irritable and ulcerated surface, is entirely superseded; and the whole subsequent treatment of the external aperture is consequently simple;

and not liable to the various inconveniences of a large fore, often tedious in being healed, and always vexatious, and disgustful.

The opening of abscesses of the breast, either by incision, or by caustic, is now universally given up. Experience proves, that, by such operations, the process of the disease, inasmuch as respects its painful symptoms, is not altered for the better, nor is the final cure thus more speedily accomplished. On the contrary, it is liable to be retarded by such treatment; for the artificial irritation produced on the skin, is sometimes the real cause of induration, and repeated suppuration in the gland, and not seldom occasions other disagreeable symptoms.

This manifest improvement in the management of abscesses, is now generally adopted by surgeons in this particular instance, and the propriety of the practice is confirmed by the result of observations, naturally arising from the general success, which the poor experience in this disease. They, from their habits in life, are more subject to it, than the rich,

and in general resign it to the operation of unassisted nature.

Venercal abscesses of the groin may also be left to the general effect of mercury on the constitution, and their local treatment will be rendered less complicated, when they are suffered to burst spontaneously, without being subjected to the knife, or caustic. My own experience, joined to that of surgeons of very extensive practice and observation in venercal complaints, justifies me sufficiently in saying, that the use of the knife, and the caustic, in all such cases, is laid aside much to the advantage of the patient. I have scarcely seen a phagedenic wound of the groin in the course of my own practice, since I have totally avoided opening inguinal abscesses by caustic, or the knife; and it seems both easy, and eligible to follow the same method with respect to abscesses in general. Mammary, and inguinal abscesses are very frequent instances of this complaint; and certainly, a simple mode of managing them with great success, may well be considered, as establishing no bad

direction for the treatment of abscesses, in other parts of the body.

It is not here, however, my intention to lay down general rules concerning the opening of abscesses. What has been advanced on the subject, seemed to me necessary, to illustrate the treatment I would recommend in the abscess of the hip joint, by pointing out the inutility of opening abscesses in general by the knife, or by caustic, for the purpose of discharging fluid, supposed to be injurious to the animal economy. Notwithstanding what has been said, I wish not to be understood as if I meant to contend, that no abscesses are to be opened. Opened, undoubtedly they must be in very many cases; and this, as well as other operations of surgery, must and will continue to be performed, till an easier method be discovered of removing many of those diseases, which are the objects of our art.

A collection of fluid, whether pus, mucus, blood, water, or even air, contiguous to, and pressing upon vital organs, acting as an extraneous substance, irritating, or in what

way soever incommoding vital functions of the body, must be discharged, as soon as its existence is ascertained, because the surface, on which it lies, may be covered with a deposit of coagulable lymph, or may be otherwise in such a diseased state, as to be rendered unfavourable, or even incapacitated for absorbing the fluid. It may be, that time cannot safely be spared to try the means, which are known to facilitate such absorption, and this circumstance must always be duly attended to, when the extraneous matter presses on the lungs, brain, or any important part of the animal machine.

This seems a sufficient reason for discharging the fluid, by an opening made by art. It is by no means certain, that the absorption of matter, or any fluid in such cases, is the real cause of the evils subsequent to a morbid affection of the viscera. The constitution seems to suffer more from the diseased state of the particular part affected, than from the fluid secreted in consequence of such disease; for it is evident that large absorptions of matter,

often takes place in scrophulous, and other abscesses, without injury in the constitution.

There is however, another set of abscesses; which are difficult to be managed. The preservation of life is not immediately concerned in their event, but it is apparent, that when the tumour bursts, the cavity which contained the matter does not collapse, and easily unite, unless it be opened to some extent. These abscesses are often contiguous to parts subject to continual irritation, arising from muscular motion, the frequency of which influences and keeps up a constant excitement on the inflamed parts, and thereby seems to promote a secretion of matter, which insinuates itself into the cellular interstices of the muscles, and prevents the morbid parts from uniting. The necessity of keeping in a quiet and relaxed state; muscles connected with a diseased part of the body, is known to every surgeon. Where it is difficult to effect this, the cure of inflammations, abscesses, and wounds, becomes very troublesome, and very tedious.

Abscesses in the neck, near the muscles concerned in deglutition, respiration, or the motion of the head; those on the verge of the anus, in the perinæum, in the axilla; those situated on the outside of the arm, near the olecranon, and many others, daily evince the truth of this observation.*

* In inflammations, abscesses, and fistulous openings near the olecranon, the immediate good effect of relaxation of muscles is clearly evident. Nothing is more common, than to see an extensive inflammation, and suppuration take place on the outside of the arm, from a slight injury of the elbow; whilst the arm is kept in a bent posture, the inflammatory disposition increases, copious discharges of matter, or glary fluid, if the sacculus mucosus is injured, flow from the external wound. The probe, if thought proper to be used, would readily pass through sinuses downward to the wrist, or upward to the shoulder; but as soon as the position of the arm is altered from flexion, to extension, and the limb is steadily preserved in a state of quietude in that form, the necessity for operation disappears. The inflammation subsides, the cavities quickly coalesce, and every painful symptom is removed, whilst this simple indication of nature is pursued, of keeping in a relaxed and quiet state, parts affected with disease.

In abscesses of the axilla, the good effect of simple treatment would be very obvious. Whilst the arm is elevated daily, or perhaps oftener, to inspect the progress of the disease, to apply fomentations, poultices, tents, or injections, it is not at all surprising, that the action of the muscles, should militate against the union of the cavity of the abscess. On the contrary, it is rather wonderful, that nature should under such circumstances, ever accomplish the union of a fistulous wound.

There are likewise other circumstances, occurring in particular parts of the body which render it expedient to deviate from a general rule of not opening abscesses. Such are a remarkable thickness of the integuments; or an intervention of some strong fascia, between the external surface, and the collected fluid; these circumstances happen in various parts of

The following case occurred to me of the spontaneous union of a deep-seated fistulous sore in the axilla, which had resisted long process of surgical treatment.

A. B. a gentleman of sixty years of age, valetudinary in his constitution, subject to pulmonary complaints, was, at the approach of a very severe winter, attacked with a feverish indisposition, which terminated in an abscess in the axilla. It was slow and indolent in its progress, but at length it matured, and was opened freely by the knife; it continued to discharge for several months, sinuses being continually formed, all of which were opened; the wound contracted finally to a small aperture, leading into a sinus, which extended far up under the pectoral muscle. The operation of opening, or counteropening was in this case impracticable; irritating tents, the sublimate troches, and injections of various kinds were used to produce a coalescence of the fistula, but all proved ineffectual. At length he had determined to content himself with his misfortunes, but going out of town, he was overturned in a carriage, and suffered a compound fracture of the arm; he was then necessarily confined to his bed, and the arm kept in a perfect state of quietude. At the end of six weeks, he recovered from his fracture, and at the same time, had the satisfaction of finding the fistulous sore in the axilla completely united.

the body, particularly on the side of the head near the temporal muscle, and in the upper part of the head.

In other parts of the body, such as those adjoining to the sacculus lachrymalis, the meatus auditorius, the vagina, or the rectum, the formation of matter is attended with the inconvenience of its being liable to burst inwardly into those cavities, so as to produce a fistulous sore; the necessity of treating these abscesses in such a manner as to prevent that misfortune, seems unavoidable.

S E C T. IV.

On the Abscess of the Hip Joint.

WITH respect to the opening of abscesses, if it be not in general useful or necessary, there are certainly reasons of strong, and peculiar force, against opening those which communicate with joints. The authorities of writers concur with the opinion of practitioners, that no progress is made towards effecting a cure, by opening an abscess, subsequent to a carious joint. So long as the matter is contained within the capsular ligament, symptoms of general debility, emaciation of the body, profuse weakening sweats, and purgings, do not usually come on with great violence, or are often found capable of being moderated, by the use of the means, which the medical art affords. But if the

matter be discharged by an external opening, made either by incision, or caustic, and particularly if that opening be large, or the diseased part irritated by tent, or seton, introduced near the cavity of the joint, dangerous symptoms come on with great rapidity, which prove fatal to the existence of the patient, or to the preservation of the limb.

When an opening is made into a joint, on account of glary fluid, or matter, formed and accumulated in its cavity, from a previous indisposition of the cartilages or bones, the immediate effects produced by such an operation, are increase of pain, loose spongy flesh starting out from the cavity of the joint, copious and fetid discharges of matter, attended with such general symptoms of debility, evidently proceeding from an aggravation of local disease, as call indispensably, and quickly, for the decisive practice of removing the limb, in order to preserve life.

But if a different mode of treatment be pursued, if the pain be moderated by opiates,

if the fluid be not discharged by an external opening, in some instances it has been known to be absorbed during a patient attendance upon the disease, and an anchylosis of the joint has ensued. If the capsular ligament and integuments give way spontaneously, the fluid thereby oozes out of a small aperture; the patient is not, in this case, suddenly exhausted by a copious and continued discharge of matter; and more time is gained for experiencing the powers of nature, and for administering the remedies of art.

In the abscess of the hip joint, the expedient of totally removing the diseased part is out of the question. It is not worthy to be considered as a resource for the cure of the disease; no prudent surgeon can even think of such an operation; a caries in the joint of the knee, may be remedied by amputating above the carious parts, and thereby extirpating entirely the local disease. But the carious hip joint admits of no such remedy; the hardiest, and most enterprising surgeon, who has ever

attempted the removal of the whole lower extremity, by amputating at the hip joint; never aimed at more, than taking away the diseased head of the thigh bone, considering the portions of carious bone remaining to be finally thrown off by a process of nature.

When so large a surface of the human body is exposed by a surgical operation, which may reasonably be supposed to have taken place in a debilitated constitution, a favourable termination can scarcely be expected by the most sanguine, and overweening operator. It must likewise be considered, that this success, if it were even acquired, would be but a maimed and imperfect monument of our art. Here I might safely observe, that there is great probability in supposing that the caries begins in the cotyloid cavity, as often as in the head of the thigh bone. Certain it is, that in every case of disease of the hip joint, which has terminated fatally in the course of my observations, I have always remarked that the os innominatum has been affected by the caries.

in a more extensive degree, than the thigh bone itself.*

The records of surgery do not afford many instances of this very hazardous operation having been performed for remedying the disease of the hip joint. The only case † in my recollection strengthens the opinion which is generally entertained, namely, that an amputation at the hip joint has but a partial tendency towards removing the disease. In this dreadful situation, where the last resource of our art would fail, where the most adventurous surgery cannot remove the complaint, the simple energy of nature frequently supplies the deficiency, and only requires the assistance of medicine, to support the constitution during the tedious process of convalescence, rejecting as it were, with horror, the active aid of operative surgery, as an exertion of skill, something worse than ostentations, and useless.

* See plates III. IV. V. and VI.

† See Medical Commentaries, Vol. VI. p. 337.

When a caries of the joint has existed for a considerable time, varying as has been said in length, with the different strength, and habits of the patients, an external suppuration generally takes place in some part contiguous to the joint. It most frequently happens below the great trochanter, over the vastus externus muscle, sometimes in the anterior part of the thigh, frequently on the nates, or higher up in the loins, and oftentimes in all these parts successively.

The progress of this suppuration is generally attended with a slight tension, and some degree of tenderness of the part, sensibly felt on pressure. It is not always accompanied with any great increase of lameness or general debility, with shiverings, or the usual symptoms of the formation of matter. On the contrary, the painful symptoms of the disease sometimes diminish, while the suppuration is advancing, and this is a circumstance, which often happens when matter is formed upon diseased bones in other parts of the body. Meanwhile the

patient is generally capable of using his accustomed exercise, and may often continue to do so, although the abscess has formed a very large, and prominent tumour, until the moment arrives when it bursts.

This however is not the most common progress of the disease; inflammation and fever are frequently attendant on the suppuration. But however these symptoms vary in different patients, depending probably upon peculiarity in constitution; upon the quantity of diseased bone producing irritation; or upon some other cause not easily ascertained; but still the local treatment in every case should be as simple as possible. There is no rational system known, which can point out the advantage to be derived from an artificial opening made in any way whatsoever, during this stage of the disease; neither is there one case on record, where an active employment of the art of operative surgery has been found materially useful in this period of the complaint.

Where the constitution suffers little from the suppuration, internal medicines are not much wanted; when painful symptoms arise from the disease, they are to be relieved by such means, as the exigencies of these symptoms require. As the abscess advances towards suppuration, the minds, both of the patient, and his friends, are often raised to a great pitch of anxiety, expecting the termination of the disorder to be synchronous with the discharge of matter from the abscess. As this however cannot be effected, the period is arrived, when the judgement and resolution of the surgeon may be shewn, in resisting the solicitations which are frequently made to him, to discharge the matter by operation.

It may seem a trifling variation of practice, to suffer this matter to make its own way gradually through the integuments, instead of seeming to assist it by making a small puncture with the lancet; or pencilling the skin with the lapis infernalis; but on the minutiae of practice, success frequently de-

pende. Whoever has attended to diseased joints, and bones, may have observed that the efforts of nature, towards the cure of a diseased bone, are more easily assisted, and proceed with more certainty, where external suppuration has not been encouraged; where air is not admitted; where general means only have been used to support the constitution, and the necessary remedies have been adopted, as symptoms seem to require, to counteract the particular cause of the diseased bone, whether it be venereal, or strumous taint, than in those cases where a different plan has been pursued, and large openings have been made over the bones diseased.

In the cure of incurvated spine from caries, if matter has not made its external appearance, so as to become of itself an object of surgical treatment, the difficulty and the hazard is comparatively small, and can in no degree be estimated with those dangers, which attend the case, where it finally makes an external appearance, under the form of a vertebral, or psoas abscess.

Whoever is of opinion that the formation of matter may safely be considered in this disease, merely as an adventitious circumstance, that it does not specifically add to the caries, or do local injury to the parts, will naturally be anxious to adopt a plan, which tends to prevent, or at least to retard the necessity of an external opening. The rather, as the important interval of time gained by this delay, may be wisely, and beneficially employed, in invigorating the constitution, and thereby meliorating the state of the disease.

Whenever this external opening unfortunately takes place, whether it be made by art, or whether it be the gradual effect of the integuments giving way from tension, the probable consequences of the instantaneous discharge, are hectic symptoms. If these symptoms come on, they may be considered as indications of the original disease being in a state, by no means leading to convalescence.

When the abscess bursts spontaneously, the opening, which is generally small, often

closes again for a few days, the matter being entirely discharged, or some portion of it remaining in the cavity. Either of these circumstances may occur without injury to the constitution in general, or any aggravation of the local disease. The abscess will frequently continue in this way, collecting, and bursting, and the patient may still, for a considerable length of time, be favoured with the enjoyment of very tolerable health.

But* if the tumour be opened even by a small incision, the cavity being instantly, and totally emptied, and an aperture left open, through which the fluid finds a ready outlet, as quickly as it is secreted, a much greater prostration of strength will probably ensue,

* As a farther illustration, and confirmation of this very important subject, I shall beg leave to quote the following passage, from Mons. Bazille's excellent paper in the Prix de l'Academie de chirurgie. Sur les effets des contre coups en divers parties du corps : " But it is necessary to repeat, for it is an instructive observation, that in less than three days, when these abscesses have been largely opened, the matter, which, at the time of opening, was always of a proper consistence, and perfectly devoid of smell, has become thin and very foetid. Perhaps, by adopting the method I have proposed with respect to the time and manner of opening those immense abscesses (with a trocar, and very late in the disease

than if the abscess had been suffered to burst in its natural course.

To support properly the vital powers in all strumous diseases, not attended with local inflammation, is allowed to be a rational mode of cure, for certainly, whatever has an immediate tendency to produce debility, seems likely to increase the disease. But the opening of strumous abscesses, connected with diseased joints, is known to produce this effect almost invariably, and ought, therefore, on the foregoing principle, to be carefully avoided in every possible case.

When a large extensive caries has taken place in the hip joint, affecting the head, and neck of the thigh bone, and acetabulum

“ which are formed in consequence of violent contusions
“ about the joint of the hip, and by making the patient ab-
“ stain from all motion which might impede the operations of
“ nature and those of art, the complete ankylosis of the ar-
“ ticulating surfaces might be obtained, which, in the despe-
“ rate cases we are speaking of, is the only source we have to
“ look up to. To what has been said on this subject I shall
“ add that it would be proper to put the lower extremity and
“ the trunk in such a position, with respect to each other,
“ that after the formation of the ankylosis the latter should
“ preserve as much as possible a vertical direction with the
“ limb. E.

of the ischion, the principal hope of cure seems to be the formation of an anchylosis in the joint, supposing the upper extremity of the bone not to have escaped from the cotyloid cavity, or that cavity not to be so much destroyed, but that it may still admit of an anchylosis.

In the circumstances, and on the supposition just mentioned, anchylosis is the utmost the surgeon can hope for, and in this stage of the disease, the best object he can pursue, uncomfortable and distressful as it must now be to the feeling of the patient, and his friends to learn, that the ultimate success he can now look for, is the dismissal of a lame, halting, hopeless object from his care. Hard, very hard it is, for all concerned, when, after an attendance of three or four years, the surgeon can produce nothing better than such a discreditable instance of his art, being the only resource, which nature affords in so desperate a situation. The parts affected are not absolutely vital organs, but, from their situation, are nearly connected with them; the danger of

its immediate loss being, in this deplorable case, so manifestly imminent, the preservation of life obviously becomes the sole object to be aimed at. If this cannot be attained without loss of parts, and their consequent motion, the imperfection of the science of surgery is to be regretted, and no blame can properly be attached to its professors*. Where impossibilities cannot be affected, where bone and cartilage absolutely destroyed, absorbed, and annihilated as far as respects this part, cannot by any art be reproduced, the preservation of life at any rate, and the preservation of the limb, as entire as possible, are still very important objects, and well worth pursuing.

Est quodam prodire tenus, si non datur ultra.

Towards the attainment of these ends, the

* Quam graviter illi laborent, qui initio articuli inflatione, dein humore illo stagnante afficiuntur, qui inflationem excitat, et acris factus, irritat, et corrodit internas deinde etiam externas partes, norunt illi, qui per menses, et annos, sedulo omni attentione talia deligaverunt ulcera, pedetentim enim ulcera illa innumeros sinus generant, quotidie insignem quantitatem ichoris fundunt, crus atrophiam afficiunt, deinde et totum corpus, vel, eroso articulo inevitabilem, atque simul incurabilem produciunt anchylosin. Schwencke *Hæmatologiæ* p. 211.

science of medical surgery affords much assistance, but surgery strictly considered as a manual art, is but of little service. The opening of the abscess, and exposing the diseased joint in some measure to the influence of external air, may even from theory be considered, as having a tendency to increase the morbid affection of the parts. It is certainly known, that in this complaint the cure is not accelerated, equivalent to the hazard incurred; nor, perhaps, is there any advantage derived from such an operation, in any case of diseased bones, excepting where the carious bone can be entirely removed.

If it be said, that an exfoliation takes place much sooner, where the surface of the diseased bone is laid open, it ought to be recollected, that the exposure of the bone to air, often creates the necessity of this exfoliation. But if its surface be not exposed to air, experience proves, that a diseased bone alters to a healthy state, and that even an extensive surface of bone sometimes recovers itself, without apparent loss of sub-

stance, where the integuments have not been opened. This is eminently conspicuous in enlargement of cylindrical bones, from venereal, and scrophulous attacks. If such alterations take place, as they certainly do, in the interstices between joints, is it not proper, indeed necessary, in all abscesses proceeding from joints, particularly the hip joint, to adopt such a practice as does not expose to air parts too nearly connected with the general welfare of the human system, to admit of large exfoliations, or of any treatment which produces such long continued, and copious discharges of matter, as are the unavoidable consequences of a free opening into these cavities?

The practice of suffering such abscesses to burst spontaneously, is, not always successful, but instances of fortunate terminations are sufficiently frequent, to justify an adherence to the practice of forbearance. On the other hand, the practice of making a large opening, either by incision, by caustic, or by seton, into abscesses communicating with ca-

ries of joints, is, in almost every instance, well known to be followed by a train of untoward, and hopeless symptoms, which usually terminate in death.

Hectical symptoms, it is admitted, will sometimes ensue, after the spontaneous bursting of an abscess from the hip joint, and doubtless require the utmost attention, and assistance. Colliquative sweats, and purgings, great emaciation, and almost total prostration of strength, frequently occur under the mildest possible treatment of the disease. Even when the abscess has burst, the patient will lie sometimes for months without the ability of assisting himself, and scarcely bear to be touched in bed, without crying out in agony from the pain in the joint. All this may be considered as a natural consequence of the loose and unconnected state of the carious bone, and of the irritable state of the fleshy parts surrounding it; nevertheless, this most unpromising case will often terminate successfully, if unnecessary surgical operation be forborn, if unnecessary motion in the limb be avoided, and if

such medicines be administered, as are of sufficient efficacy to counteract the most urgent symptoms of danger : opiates to mitigate pain, and the peruvian bark, administered in as large doses as the stomach will bear, have, in many cases which I have seen, been unquestionably serviceable.

To render this practice successful, a nutritive diet and good air are essentially requisite. Patients labouring under this disease have usually inordinate desire for animal food, which, within reasonable bounds, may safely be indulged. In cases of lumbar abscesses, and of abscesses from the hip joint disease, I have invariably seen the good effects, arising from a change of the antiphlogistic, to a cordial plan of diet. Many of the objects of this complaint, exhausted by a profuse, nocturnal perspiration, have in the morning been importunate for refreshments of the most solid nature. They have an eager craving for strong soups, meat, porter, and wine, and sicken at the offer of tea, barley water, and weak diluting beverages ; so far from denying

these indulgencies, I have uniformly experienced the advantage of complying with them.

The beneficial effects of good air, in every period of this complaint, are known to all practitioners. In the less dangerous attacks of scrophula, the disadvantage of living in large cities, in crowded hospitals, in narrow streets, and in small, low, or damp houses, is well known, but in the hip joint disease the benefits derived from a country air, and particularly in an open situation near the sea, are so great, that they seem to supercede, in a great measure, every other medical attention.

This simple mode of treatment, in which the principal points are, to avoid surgical operations, and unnecessary motion, and to procure, as much as possible, an enjoyment of good air, and nutritive diet, requires perhaps no stronger recommendation, than the reflection, that the method to which it is opposed, is uniformly unsuccessful, whilst this more easy one, both for the patient, and the surgeon, has the superior advantage of being less

terrible to the feelings of the object principally concerned.

It may not however be improper, in this place, to call the attention of the practitioner to some facts, which arise from the comparison of this with other diseases of bones, where the simple efforts of nature alone seem to be more successful than the best performed operations of art.

A carious state of the vertebræ is a complaint known to be of the most fatal tendency; yet this disease, where external suppuration has not taken place, is by proper treatment oftentimes cured. Where an external abscess has unfortunately happened, either from the nature of the complaint, or from the want of a judicious application of the caustic, in an early period, a successful termination is more likely to result from such a plan, as is here recommended, which imitates the proceedings of nature in her cure of the disease, than from the method to which it is opposed, which wastes the powers of the constitution by large openings, unavoidably

productive of copious discharges of matter. In many cases of this kind, where I have carefully observed the progress of this lamentable disorder, I have noted that, with very little surgical treatment, and scarcely any manual operation, but with the strictest attention to a liberal and nutritive diet, with a free use of the bark, as symptoms seemed occasionally to require, the disease has been kept at bay in many cases, and, in some, has been absolutely removed; the cure proving, so far as I have been able to collect, permanent, for although the incurvation remained, the patients have continued well in other respects.

There is no circumstance better known in surgery, nor any fact more worthy of attention, than the difference of success attending the treatment of fractures, and dislocations, which are called simple, and those which are commonly distinguished by the denominations of compound fractures and dislocations. Simple fractures, namely, those not accompanied with a wound penetrating to the fractured bone, with very few exceptions, are

easily cured, and bring equal credit to the surgeon, and comfort to the patient. But the cure of compound fractures and dislocations, particularly where they are thought necessary to be frequently opened, for the inspection of the surgeon, and for the application of plaisters, poultices, and fomentations, becomes tedious, and frequently hazardous. Inflammation, fever, and suppuration often ensue, the extremities of the fractured bone unite with difficulty, the cure becomes stubborn, the art of surgery is depreciated, the patient's hope of recovery frustrated, by repeated suppuration from parts connected with the injured bone, much of life is lost, and perhaps the final resource of amputation becomes, after all, unavoidable.

A process, not altogether dissimilar, sometimes takes place in diseases of joints, and particularly in that of the hip joint. To a simple fracture of bone, may be compared that kind of caries in the hip joint, which, commencing in abrasion of the cartilages, and terminating in ankylosis, proceeds in

its various stages, without an external opening formed from the diseased bone. Though the head and neck of the thigh bone, and the cotyloid cavity, become in the progress of the complaint, as it were, obliterated, and an absorption of bony matter be daily going on, a fact clearly ascertained by the shortening of the limb, though an ankylosis of the joint take place, if the extremities of the bones are in such a situation, as to admit of ankylosis, though a new position of parts may ensue, and a long series of years elapse, before a firm consolidation can be effected; yet the risk, as far as it concerns the life of the patient, is almost totally done away.* The tedious interval is not marked by the impending terror of death, the symptoms of hectic fever, colliquative sweats, purgings, and extreme weakness, which usually precede its fatal conclusion, when attended with external suppuration, rarely in this simple state of the complaint, combine to embitter the

* See case XIV.

many years of suspense, which must elapse, before a perfect convalescence can be accomplished.

During this state of the disease, which is a caries of the joint, proceeding to ankylosis, without an external suppuration, much relief may occasionally be given to the patient by medicine, and by a regimen comprehending an attention to diet, air, cloathing, and every minute particular, which has a tendency to counteract caries, or a scrophulous disposition of the habit. Every circumstance also, which is capable of exciting inflammation, and suppuration, in the part affected, must be carefully attended to. Such local exacerbation of the complaint, if likely to take place, is to be obviated by topical bleeding, with leeches, or cupping. Blisters, or even an issue, may occasionally be used, as symptoms appear to require; and in addition to those means, no plan can be more strongly recommended, on every just principle, than to take off, as much as possible, the pressure of the trunk from the diseased joint. In this

state of the disease, the shortening of the thigh bone, the deformed appearance of the hip, manifestly prove a caries of the joint, as evidently as a caries of the vertebrae, or a mollities ossium, is demonstrated by an incurvation of the spine.

The utility of the machines contrived by Vacher, for such distortion, or incurvation of the spine, consists in their power of supporting some part of the weight of the head, so as to lessen its pressure on that chain of bones, which is supposed to have undergone a morbid alteration; for it is not clear that any spinal machines are capable of producing an elongation of the vertebrae.

Reason and experience shew, that any degree of violence applied to diseased bones, has a tendency to increase the disease. The advantage of these machines however, if they do but serve to take off pressure, cannot be doubted. Their aptitude for this purpose, and their acknowledged utility in the support of the head, and the diminution of its pressure on the trunk, are facts deserving attention.

It would be fortunate, if the knowledge of these circumstances could suggest any important mechanical improvement, calculated to produce the same beneficial effect in the hip disease; as nothing can be clearer, from natural, manifest indications, than that the patients must feel ease, and advantage from every expedient to prevent the weight of the body, in any degree whatsoever, from pressing on the joint, during the prevalence of the disease, or whilst it is in a state of gradual convalescence.

Although, in every stage of the cure, the patient be well assisted by tonic remedies, as far as they respect air, diet, and medicine, except at those times when an inflammatory diathesis requires, and warrants a deviation from such treatment; and although every method be adopted to prevent, if possible, an external suppuration, yet the general plan of cure may be aided and improved exceedingly, by a vigilant attention to every lenient device, which a perfect knowledge of the local nature of the

disease, can suggest to the ingenuity of the surgeon.

When air, and exercise are recommended to the patient, in order to improve, and to maintain his general system of health, it is fit, and necessary, that he be supported with great care and convenience on crutches. In this state and period of the disease he must not be suffered to hobble with a stick in one hand, or to rest with any stress on the toes of the limb affected. It is obvious, when a shortening of the limb has indubitably taken place, that no means have been hitherto discovered, which can restore loss of substance in bones, and cartilages, and that this shortening of the limb does not depend upon spasm, and contraction of the muscles, therefore every attempt made to procure its elongation, either by encouraging the patient to use it without the assistance of crutches, to trust to a stick only in walking, or the addition of a leaden weight to the sole of his shoe, which is sometimes injudiciously made, must necessarily irritate the

disease, and provoke an external suppuration, an event which of all others should be principally dreaded, and most carefully guarded against.

The necessity of constantly poisoning, and properly supporting the body on crutches, cannot be too strongly enforced. If the crutches be left off too soon, all is undone; whatever may have been gained will quickly be lost; and a fatal termination of the disease must speedily follow.

The unseemliness of using these cumbersome supports operates strongly on the minds of young patients, who are naturally desirous of availing themselves of the use of their limbs, and are eager to get rid of the marks of old age, and infirmity. Too often, to their future sorrow, they throw them away, or at least occasionally neglect them, before a firm and indissoluble union has taken place between the thigh bone and the os inhornatam; and the natural consequence is, that fresh suppurations come on, from too heavy a pressure on bones

loosely connected, or not completely an-
chylosed.

During every period of the complaint, prior to a firm and complete union of the bones, there is the greatest propriety, indeed an indispenfible neceffity, of fupporting the body on crutches. Not only are fuppurations brought on afrefh, by throwing crutches afide too foon, or even by neglecting them occafionally; but, moreover, by fuch overhafly, and injudicious attempts to bear on the limb, before the confolidation of the bone is effected, irritation, and pain are neceffarily produced in the difeafed hip; and confequently the patient, with a view of throwing a greater proportion of the weight of the trunk on the found limb, is naturally obliged to lean, and bear on the oppofite fide. His doing of this, very foon becomes a habit, which, in young perfons, almoft invariably produces a diftortion of the fpine, in a greater or leffer degree; and this calamity adds confiderably to the unhappinefs, and the deformity of the fufferer. There is, befides all this, a

danger of occasioning, by such precipitate, and indiscreet practice, or neglect, a contraction of the superior aperture of the pelvis,* from incurvation of the os sacrum, a circumstance very material, and peculiarly unfortunate to female patients.

Pressure, and muscular motion operate powerfully, and extensively both in the progress, and termination of diseases of joints, the pathology of which is difficult to be explained, without a particular reference to their local situations. A caries of bone is the same in every part of the body, whether it be a disease in the bones of the toes, the foot, the ankle, the knee, the hip, the vertebræ, the bones of the fingers, the wrist, the elbow, or the shoulder; but the termination of caries is not equally disastrous in those several parts, all equally liable to be affected by it, the event being influenced variously by the particular situation of the bone.

* See plate V.

In attending to diseased joints, it may be observed, that the same disease of white swelling, as it is commonly called, or caries, existing in the extremities of bones, forming joints, is not so fatal in the upper, as it is in the lower extremity. This disease occurs in the elbow joint, and in the joint of the wrist, as frequently as in that of the knee, and in the ankle joint, but it is not attended with equal danger, or fatality. It is well known, that the amputation of the arm, is by no means so often performed as that of the leg; neither is it so often necessary to amputate, for the same complaint of the elbow, or the wrist joint, as it is for that of the knee, or the ankle joint. The true reasons for this difference may probably appear, from considering the situation, and the motion of the respective parts, before mentioned, although effected with one, and the very same disease.

A patient applies for surgical assistance, in a case of strumous caries in the wrist, or elbow, the disease being clearly marked by en-

largement of the joint, by violent pain, by abrasion of cartilages, and wasting of the limb, both above and below the diseased part ; symptoms, which left to themselves, are well known to terminate sooner, or latter, in suppuration of the parts. Nevertheless, the practice of surgery shews, that in the upper extremity, the suppurative progress is more easily checked by art ; and that the means, even of curing the disease, are more successful, than the very same means are, when employed in the cure of similar complaints of the knee, and much more of the ankle.

Whence does this arise ? Or how it is to be accounted for ? I think the cause is to be found in the situation of the part, which is not so much exposed to irritation by pressure, and more easily admits of a state of quietude favourable to the operation of remedies, whilst at the same time, the patient is capable of using freely the requisite exercise so conducive to the support of his general health.

When the same cause of complaint exists in the ankle joints, even with a less degree of

disease, there are but few who can, and fewer who will, give to remedies their full probability of success, or to the parts affected their fairest chance of recovery, by submitting to that confinement, and continuance in a state of rest, which is indispensibly necessary to promote the sanative operation of the one, and the relief, and re-establishment of the other. It might perhaps be impossible to have such ease as is requisite, or a complete advantage of rest and indulgence for the lower extremity, consistent with the loco-motive exercise, and change of air, essentially needful to preserve the constitution for a length of time in sufficient vigour, to resist the ill effects of an existing scrophulous caries, or of a bad disposition of the part tainted with scrophula, and hastening to caries. It must likewise be remembered that the cure of diseased joints, whether effected by nature, in her process of ankylosis, or accomplished by art, by its means to preserve uninjured the cartilaginous ends of the bones, is a very tedious operation, and very liable to be interrupted by a variety

of causes, contingent, and very difficult to be foreseen. If such a disease of the ankle joint proceeds to suppuration, and an external wound ensues, it then becomes a malady, to be cured only by amputation; for, the parts being thus injured, experience shews that the disease would, if not prevented by amputation, prove fatal. When the cartilages of the bones which form this joint are abraded, it is difficult to conceive, that an anchylosis can become sufficiently strong to bear the weight of the body, it would be liable to be disturbed, by the least attempt at active exertion, nor does it seem probable, that the whole weight of the trunk could ever be permanently supported on this joint, although the bones were perfectly united by anchylosis.

This opinion I have found from a careful, unprejudiced consideration of this disease, as far as it respects the joint of the ankles; for I have never seen a firm and useful limb preserved, after a caries had once really taken place in this joint; nor after a disposition to caries in it, had clearly become manifest.

On the contrary I have always observed, that the cures boasted of in such cases, whatever reputation they may bring to the performers, do little for the unhappy patients, ultimately proving to be suppositious, and short lived.

The joint of the knee is also peculiarly unfortunate, when it is attacked with this disease; instances however of successful treatment occur much oftener than in the ankle joint. When a strict adherence to rest has been maintained for a considerable length of time, during the early period of the disease, local applications have been manifestly useful, and the joint has been preserved entire.

In other cases, where the caries has been more advanced, an ankylosis has taken place in the knee joint, between the condyles of the thigh bone, and the upper end of the tibia; and if, during that process, the leg has been kept extended, it has sometimes happened, that the limb has been preserved in an useful state*. But if it has been kept in a bent po-

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* See case V. of white swelling of the knee.

sition, during the course of the cure, the limb, although thus preserved, cannot be of much use; and it would have been better, for the general purposes of life, if the patient had suffered an amputation, and availed himself of the well-contrived, and commodious substitutes, which ingenuity supplies.

There is a wide difference when a caries takes place in the wrist, or elbow joint; for, although an ankylosis should not quickly form, the necessity of amputating the upper extremity does not certainly follow merely from the joints being carious; it being a known fact, that this disease, particularly in young subjects, often continues for a great number of years, and produces repeated suppurations, without any very material injury to the constitution, and yet a complete and acknowledged caries may ultimately terminate with the inconvenience only of a stiff joint; and the limb itself even in a state of ankylosis, may become very useful, provided it has been kept in a proper position, during the formation of that union.

The certainty of this fact is highly useful, and it is of great importance to be generally known by all practitioners in surgery, who should be well apprised, that a caries of a joint is not of itself, acknowledged as an indispensable reason for the removal of the limb. The energies of nature are often equal to the correction, and even the cure of such tremendous diseases; and it will be found, that the most unpromising, and far-advanced cases of this kind often terminate successfully, without any such operation. This is a fact well known to, or boldly assumed by, irregular practitioners of medicine, and surgery, who avail themselves of that dread of pain which is inseparable from human nature, and graft their own profits upon it, by censuring and condemning indiscriminately, all painful surgical operations in these disorders, craftily leaving their diseases to the powerful efforts of nature, which often remedy them spontaneously without the intervention of art. Meanwhile they live by their enormous gains on the useless and trifling medicines they vend;

and, impudently imposing on the credulity and weakness of mankind, and arrogating to themselves the reputation of cures, which, when not entirely effected by nature, are fallacious and abortive, scarcely outliving the shameless hand bills and productions which announce them. So just is the observation of Mr. Pott on the practice of empirics, respecting their treatment of the fistula in ano, applicable with equal propriety to their treatment of many other local complaints. "Regular practitioners are looking for what these people do, but overlook what they do not do."

SECT. V.

*Cases of the Disease of the Hip Joint, with
Observations.*

CASE I.

*Disease of the Hip Joint in its early state,
cured by an Issue made by Caustic.*

MR. ASHFIELD, in Great St. Andrew's Street, Seven Dials, on the 30th of December, 1789, desired me to visit his son, a boy of eight years old, on account of a lameness, proceeding from a complaint in the hip joint. The parents of the child were apparently healthy, excepting that the father was subject to ulcerations of the eyelids. The boy was of a fair complexion, and had enjoyed an uninterrupted state of

health, till the last six months, when it was observed that he was very lame, and was easily tired in walking.

At the time I saw him, he was just recovering from a fever, for which he had been attended by Mr. Jackson, apothecary in Soho square. The right leg was swelled about the ankle and the pain in that knee was so violent, that it could not be alleviated by opiates. The thigh and leg on the same side were wasted; and the affected limb was found to be half an inch longer than the other. The lymphatic glands in the groin were enlarged, and he felt uneasiness on pressing round the hip joint; The general state of his health was much affected, he was very weak, and sinking under profuse and colliquative sweats. The bark, which had been very judiciously ordered for him, was continued, and the following day, I applied the caustic, rubbing it on the skin, so as to produce an oval eschar, an inch in length, an half an inch in breadth, behind the great trochanter of the thigh bone. I saw the patient several

times, during the first fortnight after the application of the caustic, and had the pleasure of observing, that the local and general symptoms of the disease began to give way.

On the 16th of January, 1790, the issue discharged freely, his strength and appetite were returning, he slept during the whole night, and the colliquative sweats were considerably checked.

Feb. 9th, he continued gaining strength, walked with a stick, but was very lame; his mother however thought, that he then walked better than he had done for four months, the pain in his knee was entirely gone, and from this time, there was a visible alteration in every respect for the better.

In the month of June, the parents sent him to school, keeping the issue open at the same time with great care.

August 10th, the elongation was still evident, but the boy was in every other respect well, and walked three or four miles a day.

December 7th, 1790, I found him in a perfect state of health, the limb was of the

same length as the other, and the emaciation of the thigh and of the calf of the leg, was no longer perceptible ; he kept three peas in the issue, and went to school at some distance from London, using the same exercise as the other boys.

October the 9th, 1792, the issue was dried up, and the boy remained quite well.

CASE II.

Disease of the Hip Joint, cured by an Issue made by caustic.

ABRAHAM LEWIS, a boy of seven years old, was recommended to the Westminster General Dispensary, September 16th 1790. He was of a pale complexion, and appeared greatly emaciated ; not having been able to get out of bed for the last three weeks, without assistance, and after being taken from the bed, he could not walk for the first hour.

By walking, he soon became tired, was frequently sleepless during the whole night, and cried out incessantly from pain in his right thigh, and knee. The thigh and leg were wasted considerably, the lymphatic glands in the groin were swelled, and he felt much difficulty in moving the limb. On measuring the two lower extremities, the diseased one was found to be half an inch longer than the other. It was very manifest, that he could not support the trunk equally on both the lower extremities, for, in attempting to stand in an erect position, the body was inclined to the left side, and principally supported by the left leg, which was in a firm, and rigid state of extension, whilst the right knee was bent, and partially relaxed.

On the 17th of September, I applied the caustic, in the manner described in the foregoing case. On the 22d, I saw the patient again, and was informed that the pain in the knee was lessened, and that his health was somewhat mended.

On the 30th, he was much stronger, walk-

ing without any assistance, and the issue discharged freely. On the 18th of October, he was free from pain, his health was much better, and from that time he continued mending visibly in every respect.

He kept the issue open for two years, its surface being frequently sprinkled with powdered cantharides, but no other external applications were used to the part, nor any internal medicines given, excepting small doses of powdered jalap, to keep his bowels open. On the 18th of October, 1793, I saw this patient, in the enjoyment of perfect health.

CASE III.

Disease of the Hip Joint attended with an external suppuration, and terminating in Anchylosis of the Joint.

ON the 28th of September, 1785, a gentleman from Great Marlow in Buckingham-

shire, called on me to see his daughter, who had a violent pain and swelling from the hip joint. The limb was contracted, and wasted; she complained much of frequent pains in the knee; she was eleven years of age, apparently healthy in every respect, but what proceeded from the effects of the local disease. She had no disposition to pulmonary complaints, no scrophulous enlargement of the extremities of bones, nor any other symptom, which indicated a strumous constitution.

The caustic was applied in the usual manner; a suppuration however from the joint soon followed, but was not attended with any dangerous symptoms. The abscess was suffered to burst spontaneously, and continued discharging near two years, when the fistulous sore healed, without any particular treatment. I did not see this patient above three or four times, but the result of the case was, that she kept the issue open for several years. At the present period, October 1792, she is grown a tall, healthy woman, free from any

inconvenience, but what arises from the limb affected, being about half an inch shorter than the other.

CASE IV.

*Disease of the Hip Joint cured by Anchylosis,
during the use of the Caustic.*

JOHN WILSON, son of Mr. Wilson, No. 5, Gibson's Court, Marybone Street, St. James, was brought to me, in the year 1778, at the age of four years, labouring under the symptoms of the disease of the hip joint, with an emaciated and elongated limb, pain in the knee and hip, with the general indications of a debilitated habit of body. I recommended the use of the warm bath, which was continued a long time, without any permanent benefit, although it produced a temporary alleviation of the painful symptoms. Electricity was likewise used, and repeated blisters

were afterwards applied to the hip, without any real advantage.

In 1781, three years after his first application, large doses of laudanum hardly produced a temporary suspension of the pain, and his general health became daily worse. I then made a large issue by caustic on the hip; and the pain gradually diminished after this application. He began to walk on crutches within a few months, and the issue was kept open five years with great perseverance, till at length he recovered with a stiff joint.

On the 30th of October, 1792, the joint seemed perfectly ankylosed; he walks now several miles in the day, goes through the daily laborious occupation of a carpenter, and I observe that in raising the diseased thigh, and in walking, the motion evidently appears to arise from the whole column of the vertebræ, moving as it were, on the axis of the sound joint.

CASES V. AND VI.

Instances of the Disease of the Hip Joint, in which the Caustic was applied with apparent benefit, and an external Suppuration ensued upon drying up the Issue.

J. SHAW, eight years of age, was brought to me, in February 1789, by his father, Mr. Shaw, Ironmonger, in Moon Street, St. Ann's, Soho, for a complaint in the hip joint, which shewed itself by an elongation, and wasting of the limb, a flatness of the nates on the affected side, pain in the knee, and general symptoms of debility. The patient was evidently of a strumous habit, pale, and emaciated, with glandular swellings in the neck, which had suppurated.

The particulars of his disease, which came to my knowledge, were, that in the preceding year he had the small pox, which left him in a weak state of health. His pa-

rents sent him to the country for his recovery; where he fell from a hay-rick, and soon after the accident was observed to walk very lame.

The disease being evident, I applied the caustic in the usual way, a small distance from the great trochanter; he was quickly relieved from some of the most painful symptoms of the complaint, and afterwards improved in his health. The issue was kept open for some time, discharging freely. His parents however, anxious for a recovery more speedy than what I could promise, took him to a professor of animal magnetism, at Hammer-smith, by whose advice, the issue was healed, and he was directed to bathe the part affected with milk and water. I did not see this patient again, for five months, when he was brought to me, with a large abscess, which extended from the os sacrum, to the upper part of the thigh. This suppuration, I was informed, had taken place about two months after the issue was dried up. I advised him to suffer the

abscess to burst spontaneously, to take the peruvian bark, and to support him with good nutritive diet.

His progress to convalescence was very slow, the abscess discharging from several sinuous ulcers for more than two years. At this time, he is perfectly recovered with an ankylosed joint, and walks without crutches, on a high-heeled shoe, resting principally on his toes. In progression, and in raising the limb, there is an evident motion in the lumbar vertebræ; his scrophulous symptoms have all disappeared; and he seems likely to overcome every symptom of debility in his habit.

Ann Rescorla, daughter of Mr. Rescorla, taylor, in Charlotte Street, Portland Place, was brought to the Westminster General Dispensary, when she was five years of age, for a lameness in the right leg and thigh, she was of a fair complexion, and light hair, had been subject to sore eyes, and eruptions on the head, which came on soon after the

measles. She suffered exceedingly from the pain in her knee; the leg and thigh were emaciated, and the general state of her health was considerably affected.

I made an issue with the lapis infernalis, in the usual place, its immediate good effects were soon obvious from the amendment of her health, and the cessation of the painful local symptoms. This wound was kept open for three months; at the end of which time she was sent to the sea; the peas were then discontinued, and the issue healed.

I saw her immediately on her return, when there was evidently an abscess formed in the hip. This suppurated, and burst spontaneously, discharging for a long time, without injury to her constitution. The joint is ankylosed, she walks resting on her toes, but is otherwise perfectly well.

CASES VII. AND VIII.

Two Cases of Disease of the Hip Joint, occurring in the same Family.

THE following instances of disease of the hip joint were obviously the same, but the mode of treatment was different. In the first the most active means were used to resist the progress of an external suppuration, and the event was successful. The second case was left entirely to nature, and the result was unfortunate. They were both seen, in the progress of the complaint, by Mr. Hodges, apothecary in Margaret Street, and were occasionally visited by me.

A boy of fourteen months old, received a fall, which did not appear at first to produce any important consequences. At the time when he might naturally have been expected to have walked alone, a lameness was observed, and he was committed to the care

of surgeons of eminence, the means used for his relief, were leeches applied to the hip, repeated blisters, and an issue made by caustic. An external suppuration however ensued, and the boy gradually recovered with the disadvantage of a shortened limb, and an ankylosed joint. At this time, he is fourteen years of age, he has been well for several years, walks without a stick, resting principally on his toes, he rides on horseback, and is in perfect health. It is observable in this case, that, when in progression, he puts forward the shortened limb, the motion evidently originates from the lumbar vertebræ, which, as he walks, are raised forward, to give a progressive motion to the ankylosed limb.

I was called upon to see the brother of this young gentleman, five years of age, with every symptom of a rapid advancement of caries in the hip joint. He was pale and languid, the limb was wasted, and elongated, and the pain in the knee violent. I recommended those means, which had been suc-

cessful in the former case, but was not fortunate enough to prevail on the parents to adopt my opinion. They seemed to impute the shortening of the limb in the former case, to the remedies employed, rather than to the destructive nature of the disease. I saw this patient, eight months after, and found that a suppuration had taken place, under which the child languished for several years, and died.

CASE IX.

An Abscess of the Hip Joint, terminating in Anchylosis.

THE case represented in the fourth plate, was one of the first, which occurred in my practice. I did not see the patient, during the first attack of the complaint, but was sent for, upon a suppuration taking place in the hip; he was twelve years of age, and had been in other respects healthy. The disease

was managed in a very simple manner, the suppuration repeatedly burst; he was much reduced in his general state of health, and received great benefit from the peruvian bark. He recovered from the complaint, with a stiff joint, and died three years after, from the confluent small pox. I obtained permission to open the body, and preserved the anchylosed joint.

The anchylosis of joints is often considered to be a disease of itself, although it will be found more generally to be a natural and beneficial termination of caries, excepting in those cases, where it is occasioned by strong contraction of muscles, without any previous indisposition of the bones.

Anchylosis is however less frequently produced by muscular spasm, and contraction, than by coalescence of ulcerated surfaces of cartilages and bones, and this is an union which it would be absurd to counteract, as it is indispensably necessary, in many cases, to the preservation of the limb affected, and

in the abscess of the hip joint, it is the only means of preserving life. In the incurvated carious spine, the cure is performed by ankylosis; the cure also of carious joints in the upper extremity, and in other parts, is frequently effected in this mode without any assistance from art.

In all such cases, a great degree of precision is necessary, in order to ascertain, in the first instance, whether the joint has suffered that degree of abrasion, which must finally prove fatal to its motion. If such an event has decidedly taken place, a very particular management of the diseased joint should be pursued. Nature must be left undisturbed, by officious, and useless interpositions, and much of the formidable apparatus of surgery should be omitted.

A cautious practice should take place with respect to fomentations, poultices, frequent dressings of the wound, pressing out the matter from the fistulous sinuses, and the examination of them by the probe. Above all, particular care should be taken not to rub

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against each other the abraded surfaces of the diseased bones, in order to ascertain to our own minds, or to demonstrate to the conviction of others, the existence of caries with a worse than idle attention to attempt the preservation of motion, when it is perhaps impossible, even to try the experiment, without the destruction of life.

All such treatment as I have here mentioned should be forborne and discarded, as tending to frustrate the best and only means, by which the condition of the parts can be improved. I wish I could say, that I had seen but a single instance of the necessity of amputation produced by rough, and injudicious handling of diseased joints. In the early attacks of scrophulous caries, frequent, or violent motion, is likely to cause abrasion of the internal surface of joints; and in the more advanced stages, when abrasion has actually taken place, it necessarily excites suppuration, and thereby prevents ankylosis.

CASE X.

THE case represented in the fifth plate, is such as frequently occurs. I have no account of its particulars, having met with the bones accidentally. It shews the head and neck of the thigh bone partially destroyed, and the cotyloid cavity quite obliterated; and also manifests the precarious and insecure connexion, which these bones are liable to form from disease. Consequently it presents to the eye of an attentive observer, the cause of the weak and paralytic state of the limb, which sometimes remains, when the dangerous symptoms of the disease are passed over, differing widely from the firm ankylosis, exhibited in the fourth plate. It shews also a lateral incurvation of the lower part of the spine, and contraction of the superior aperture of the pelvis, both of which circumstances were probably brought on, by the weight of the trunk bearing unequally on the os sacrum.

CASE XI.

Instance of Caries of the Hip Joint, followed by large Suppurations, finally terminating in an anchylosed Joint.

JAMES MIDDLETON, at No. 14, Little Russell Street, Bloomsbury, a boy of a fair complexion, and light hair, born of healthy parents, in the fifth year of his age, met with a slight accident, which was not much attended to, till he was observed to walk lame. Various means were adopted for his relief, and amongst others, he had a small issue made by caustic, in the upper part of his thigh, which contained only three peas.

When I first saw him, seven months afterwards, there was a large abscess formed, extending from the os sacrum behind, to the trochanter major, the limb was shortened, and emaciated, and his general health

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was very much affected. The abscess soon after burst, and he was confined to his bed, from weakness apparently produced by the copious discharges of matter, from repeated suppurations, which continued successively for eighteen months. During this time, he was the most emaciated object I ever saw, the pain in the hip being so excessive, that it was scarce possible to move him in the bed. His diet was animal food, strong broths, and porter, all of which he eagerly solicited; he received much benefit from the peruvian bark, of which he took large quantities in powder; at length he began to recover, the discharge of matter decreased, the pain abated, and he became capable of being moved in the bed with less pain. He has since regained his general health, and walks with the assistance of a high-heeled shoe, and a crutch stick; the joint of the thigh is ankylosed; and as he walks, the progressive motion is evidently produced, by a flexion of the inferior vertebræ of the back, and the superior lumbar vertebræ; these seem to bend

forward in walking, and to carry with them the os innominatum, and the thigh, which are now clearly in a state of coalescence.

On the 2d of March 1793, this boy fell down, and broke the thigh bone, two inches below the trochanter. The anchylosed joint was not injured, or in the least affected by the accident, from which he perfectly recovered in the usual time.

CASE XII.

Disease of the Hip Joint, where the Symptoms disappeared without any external application, or the use of any internal Medicines.

J. NEILD, son of Mr. Neild, apothecary in Short's Gardens, St. Giles's, was, without any previous indisposition, attacked with lameness in the right leg; he was of a fair complexion, six years of age, and apparently healthy. The limb was elongated, and wasted, he walked very lame, had considerable

pain in his knee, and thigh, and suffered a little from general indisposition. No kind of medical, or surgical treatment was employed, his general state of health after improving, without the use of internal medicine, or external application. I saw him frequently during the continuance of his complaint, from which he is now recovered. The limb is shortened, the trochanter is very prominent, he halts a little in walking, but has not undergone any of the dangerous, and painful symptoms, which are usually subsequent to this attack.

CASE XIII.

An Abscess from Caries of the Hip Joint, where the wound healed without any difficulty; the Patient remaining in good health, with the Inconvenience only of a Stiff Joint.

THOMAS HODGKINSON, a boy of eight years of age, was recommended to the West-

minster General Dispensary on the 9th of November, 1790. He had had the small pox four years before, and soon after, without any previous accident, he was observed to walk lamely, and unsteadily; he afterwards complained of violent pain in his knee, and the limb became elongated. When I first saw this patient, there was a large suppuration formed on the outside of his thigh, although he was in other respects perfectly well, and free from any symptom of general debility; the abscess soon after burst, and healed in a few months. He has since continued in good health, the joint is ankylosed, and the limb is somewhat shortened. He walks without a stick all the day long.

CASE XIV.

A diseased Hip Joint, terminating in Contraction of the Limb, and Anchylosis of the Joint, without an external Suppuration.

THE following case was seen, and principally attended to, by Mr. Woan, surgeon, in Mortimer street.

Master W——, born of healthy parents, a lively boy, of fair complexion, was in the full enjoyment of his health until the age of four years, when he had a fever, and afterwards the hooping cough, from which recovering slowly, he was sent to Brighthelmstone for the benefit of the sea air, and returned perfectly recovered. In the winter of 1789, he received a fall when sliding on ice, but did not seem to be materially hurt by it, for he walked home, and in the afternoon, walked again the distance of half a mile to his school.

He did not complain much at that time, but a few weeks afterwards he was attacked by the measles, and soon after his recovery from that disease began to limp, discovering some of the first symptoms of diseased hip joint, namely, an elongation of the limb, a pain in his knee, weariness, and some degree of general debility. In the summer of 1790, he was again sent to the sea side, and bathed for four months; he returned from the sea bathing, with the disease going on its usual way, the thigh bone shortening, great pain in the hip and knee, with a total inability of setting his foot on the ground.

Topical bleeding by leeches, and a repeated application of blisters, prevented an external suppuration, which was rapidly advancing. This young gentleman had a very troublesome enlargement of the tonsils, which occasioned a deafness, an uneasy respiration, and some difficulty in deglutition. These circumstances induced his parents to send him once more to the sea side, from which he returned, without any considerable advantage to the disease of

the hip joint, although the tonsils were much reduced, and consequently his respiration was become easier, and the difficulty in swallowing removed. They now determined to rest his cure entirely, on strict attention to his general health, to forward which they put him to school in a healthy situation near London, with the strictest injunctions to support himself thoroughly on his crutches, and to bear as little as possible on the diseased limb.

On the 29th of January, 1794, he is daily mending in his health, he stands erect on his crutches, grows taller, and the anchylosis of the joint seems nearly perfect. He can support himself, resting his weight on the sound limb, and on the toes of the other. When he walks, the progressive motion of the trunk seems to be effected by a flexion of the whole body upon the thigh joint of the sound side, aided by a greater degree of motion in the lower vertebræ than usually takes place in subjects free from this complaint.

CASE XV.

THE following case of disease of the hip joint is not yet completely cured, but I thought it deserved particular notice, as it is the only one, which was occurred to me, where a suppuration took place, and the matter afterwards disappeared, during the use of an issue made by caustic, and a great degree of rest*, which became unavoidable from the extreme weakness of the patient, and an absolute inability of motion in the part affected.

J. Rand, a pale, emaciated boy of seven

* In Mr. Justamond's works, p. 125, a remarkable case is related of a disease of the lumbar vertebræ, in consequence of which, an abscess formed in the groin, under Poupart's ligament. This tumour continued of a large size for four months, and then gradually disappeared without any surgical treatment; the patient was confined to his bed for twelve months, and at the end of that time recovered perfectly.

years of age, was recommended to the Westminster General Dispensary, in April 1793, for the disease of the hip joint. His general state of health was very indifferent, and he complained of great pain in his knee, thigh, and hip: the limb was shortened, and contracted upward to the abdomen. On the outside of the thigh, over the vastus externus muscle, there was a swelling which, evidently contained a fluid, the tumour was not however very prominent, nor painful to the touch.

Notwithstanding the little chance of success likely to be derived from the use of the caustic in this case, I applied it in the usual manner, and his mother kept the issue open with great perseverance; the boy, however, grew worse in his general state of health; the limb became more shortened. He was confined entirely to his bed for the whole summer, labouring under the most profuse perspirations, frequent purgings, and extreme debility. In this state he was nourished with strong soups, meat, and porter, for all

of which he was frequently calling ; and bark and opiates were also of great advantage to him.

At length, when he began to regain some strength, and by degrees to turn in the bed, I had the pleasure of finding the collection of fluid entirely absorbed. The limb now grows stronger, he can put his toes to the ground, and in moving his body, the diseased joint, by the assistance of his hand, moves with it. Symptoms of amendment continue daily, but still the event of the case may be considered as precarious, for the anchylosis is by no means completely formed. The patient is highly scrophulous, he lives in a close, damp apartment, and the approaching winter may probably excite the stumous diathesis in the habit, and consequently exasperate the local complaint.

Nov. 1, 1793.

After having enumerated several cases, where the event was not wholly unfavourable, it is but fair to acknowledge, that I

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have seen instances of this disease, which have terminated fatally, where the caustic had been applied. But this has happened, for the most part, if not always, where the application was deferred until the limb was shortened, and contracted, and an external suppuration was evidently approaching, before the caustic was applied. I have also seen some cases, where the abscess has been suffered to burst spontaneously, and where a cautious management of the disease has been in a great degree adopted, yet the patient has finally fallen a victim to the violence of the disorder.

But, among all such instances, I do not recollect a single one, where some considerable error had not taken place in the management of the case, with respect to medicine, diet, or exercise. The unfortunate issue might still be fairly ascribed to the patient's having unavoidably been subjected to a close, and confined situation, where the advantages of a healthy atmosphere, and a free circulation of good air, the most essential requisites to

recovery, were totally wanting. In one case, to which I particularly attended, the patient was highly scrophulous, and for two years before his death, was lodged in a cold and damp subterraneous apartment. Another unfortunate case was the subject of the narrative immediately following.

CASE XVI.

Fatal Instance of Caries of the Hip Joint.

ANTHONY MYHILL, eleven years of age, was recommended to the Westminster General Dispensary. His parents were both apparently healthy, and he had not been subject to any particular complaint till he was eight years of age, when he was supposed to be affected by worms. I was informed that in the year 1790 he lost the use of one of the lower extremities for some weeks, which he afterwards recovered, as I was told, by means of electricity.

When I first saw him, the limb was wasted, and beginning to shorten, he felt great pain in the hip joint, and was unable to walk. I made a large issue with the caustic, and saw him several times afterwards, when he appeared to be much relieved from pain. Nevertheless a suppuration ensued, and he lay for many months an emaciated object; it being with great difficulty that he could be moved from the bed. At length he died, and I was desired to examine the body.

The sixth plate shews the morbid state of the bones in this subject: the head and great part of the neck of the thigh bone were obliterated; the cotyloid cavity was thoroughly diseased, the caries extending from thence, to the os pubis, ischion, and even to the spine of the os ilium. I found, when it was too late, that for several months previous to his death, he had been lodged in a cold, and damp place, in Lambeth Marsh, and that his parents had been persuaded to keep him to a low diet, principally of milk and vegetables, although he was calling perpetually for animal food and porter.

CASE XVII.

Disease of the Hip Joint, where, the Anchylosis being disturbed by external Injury, a Suppuration in the Joint came on, which soon proved fatal.

ON the 14th of December, 1781, I examined the hip of ——— Roberts, a boy twelve years old, who died the preceding day, in consequence of a fever, apparently produced by a fall, which he had received a fortnight before.

I had seen him several times in the course of the two preceding years, with the usual symptoms of elongation of the limb, and the pain in his knee. For some time before, the limb appeared to be contracted, and an anchylosis seemed to be forming in the joint, his general health was mended, and he was daily sent to a school in the neighbourhood,

where he met with the accident. I saw him a few days before he died ; there was a tension upon the integuments of the diseased part, but no apparent fluctuation of matter. I obtained leave to examine the body, and in cutting into the joint, there were two large spoonfuls of matter discharged from the cotyloid cavity, the head of the thigh bone was entirely wasted, the cavity of the joint was carious, and filled up with fungous flesh, intermixed with bony matter.

The foregoing case naturally proves the necessity of using the greatest degree of caution, in the management of patients whilst an anchylosis of the joint is forming, and particularly of guarding, as much as possible, against every situation, and circumstance likely to expose the limb to injury, before a firm union has effectually taken place.

CASE XVIII.

An Instance of Caries in the Hip Joint, which after eighteen years continuance proved fatal, from the Patient's Irregularity of Living, and from his laying aside his Crutches before an Anchylosis was perfectly formed.

B——G——, a strong and healthy looking young man, twenty years of age, consulted me, on account of a sinuous sore in the hip. The particulars of his case were, that in his infancy, his hip was said to be dislocated by accident. From that time however, he had been subject to suppurations about the hip joint, which had frequently given him much trouble, although they had always finally healed, with the inconvenience only, of a small fistulous sore. He had constantly walked with crutches till within the last year, when he left them off, and attempted to walk with a stick.

The motives for his consulting me proceeded from the limb becoming weaker, the discharge from the sore increasing, and his general health being considerably impaired. I soon convinced him of the impropriety of laying aside his crutches, the weight of the trunk, which was considerable, as the patient was inclined to corpulency, pressed too much on the diseased joint. He therefore resumed his crutches, used sea bathing, and in three months was much recovered. In the course of the two following years, this unfortunate young man contracted a habit of drinking spirituous liquors, the disease of the hip joint was again troublesome, and at last proved fatal.

The reflections which this case suggests, are obvious, and manifest the great danger of pressure on the joint, before the ankylosis is completely formed. This case evinces also the dreadful consequences of an improper mode of living, under the predominant influence of a strumous affection. The disease in the above instance, as in many others, might

probably have terminated favourably, for the patient was in possession of youth, and strong stamina of constitution in respect to his vital organs, but unhappily contracted the destructive habit of drinking spirits. This pernicious custom appears in some constitutions to produce a sturinous habit, and seldom fails of rendering fatal many sturinous diseases, which otherwise might be palliated, or even cured effectually.

CASE XIX

A Case of Caries in the Hip Joint, during the progress of which, the Patient died of a Hydrocephalus internus.

RICHARD PULLEN was recommended at the age of two years, as a patient to the Westminster, General Dispensary. He was of a fair complexion, born of healthy parents, remarkably strong in the first year of his life, so as to walk alone in the eleventh month.

At the time I saw him, he had been lame for four months, the lameness having proceeded from the small pox. The diseased limb was visibly shorter than the other, as he laid upon his belly, the thigh could not be drawn backwards without great pain; the hip was swelled, and projected outwards, the integuments appearing rather tense on the outside of the thigh, near the great trochanter; and he had, moreover, a difficulty in voiding his urine, which was sometimes purulent.*

I made an issue by caustic, in the usual place, not however, entertaining great hopes of relieving him. He was however, easier for some time, but in the course of three months

* The discharge of pus or mucus with the urine, is not an unusual occurrence, nor always an unfavourable one. Hippocrates considered it as a very probable symptom of recovery, "Prædict." Lib. ii. Sect. vii. Van der Haar, in the essay before mentioned, gives some very interesting and successful cases, wherein this circumstance took place. Sometimes, however, in the latter stages of the disease, a communication is opened between the bladder and the diseased parts, and the suppuration of the joint is discharged with the urine; but, this is a very different case, and always a fatal one, at least it has been so in two instances which I have seen. E.

an abscess formed, and burst. He was supported by proper diet, and bark, and appeared to be gaining strength, when he was attacked with restlessness, and vomiting, succeeded by constipation of the bowels, dilated pupils, convulsion, and stupor, symptoms clearly shewing a hydrocephalus internus, which soon after proved fatal to him.

I opened him, and found three ounces of water in the ventricles of the brain, the sutures of the skull not being closed. With regard to the hip joint, the cartilage of the thigh bone was abraded, the cotyloid cavity considerably diseased, that part where the ligamentum teres is attached, being almost corroded through the substance of the bone. In another part of the cavity, nearer the foramen, the head of the thigh bone seemed to be in a process of uniting itself to the acetabulum coxendicis, where an useful anchylosis might probably have been formed, if the child had survived the hydrocephalus.

CASE XX.

THE following narrative is taken from that valuable collection of Greek surgery, published at Florence in 1754, by Antonius Cocchius. It is extracted from a note, wherein the editor remarks upon a passage of Asclepiades, in order to shew the attention of that celebrated physician to diseases in general, and particularly to the complaint of the hip joint. Asclepiades, who appears to have written some commentaries on the works of Hippocrates, which are now almost totally lost, says, " That he had met with two patients, " labouring under this disease, one of whom " was a native of Paris, who had neither " been thrown down, nor bruised; yet the " disease beginning with a pain in the lower " extremity, he was confined to his bed for " three months; the head of the thigh bone " being finally thrown out of its proper situation.

The other case which occurred to him, was that of a player, to whom the same circumstance happened, the head of the thigh bone being removed from the cavity of the joint; without external violence.

Cocchius says, " These cases of disease of the hip joint being very rare, it shews, that Asclepiades employed himself for a long time in visiting patients. I had once, says he, an opportunity in the year 1745, of opening a man who died of the hip disease, in whom the head of the thigh bone was removed from its proper situation. The name of the patient, who was a servant of mine, was Dominico Palatio, his right leg had been weaker than the other from his infancy, and seemed longer, so that in walking he appeared to go rather lame.

When he was thirty-three years of age, he fell from his horse, and his right thigh was crushed upon the ground, but not so much hurt, as to prevent him from finishing a journey of two days on horseback. He remained well for two months, but having

another journey to perform in the month of January, he was suddenly seized with a violent pain, from the hip to the sole of his foot, as he got off from his horse, and walked in heavy boots. This pain gave way in some measure, but never entirely left the joint of the hip ; he went through his usual business in the day, without much inconvenience, but towards the evening, the pain and weakness returned ; so that at the end of the month, he could neither walk, nor stand. When he was in a horizontal position, there appeared no swelling ; but upon attempting to raise his thigh, he was instantly seized with an acute pain in the hip. The diseased limb, was now an inch longer than the other, the thigh was wasted, and he had no power of raising it, although the rotatory motion of the limb still remained.

A slow fever soon came on, attended with an atrophy of the whole body, and at the end of a month, a large tumour shewed itself on the outside of the thigh, below the great trochanter, not painful to the touch, but

evidently containing a fluid. This tumour matured slowly, although proper applications were used to hasten its suppuration. In the latter end of April, it was opened by incision, and a small quantity of thin inodorous matter was discharged. The wound was fomented, and otherwise attended to for a long time, and sometimes appeared clean and healthy, at other times foul and putrid.

At the same time, he seemed to raise his leg with more facility, but soon after, a fever came on, attended with shiverings, and a considerable swelling took place on the hip, and in the groin. The foot also swelled, the leg became incapable of motion, and from being longer than the sound one, it was now shorter. A quantity of matter issued from the wound which diminished the tumour, and a globular hard substance was perceived in the groin, which was conjectured to be the head of the thigh bone. Matter continued discharging daily, either spontaneously, or from pressure; at length

it lessened in quantity, the ulcer became white and dry, the patient sunk under extreme weakness, and at last died from a slight inflammation in the lungs.

The dissection of the body exhibited to view a quantity of matter, which filled up the interstices of the rectus, and vastus externus muscles, from the hip downward to the knee. The posterior muscles, particularly the glutæus maximus, where it is connected with the thigh bone, the glutæus medius, and minimus, and all the fleshy substance from the spine of the ilium backward, behind the trochanter major, were affected by the disease, a few muscular fibres alone remaining, so that the surface of the os ilium was entirely exposed, and apparently corroded. The head of the thigh bone, removed from its socket, lay inward, on the upper edge of the cotyloid cavity, held in that situation, by its connexion with the psoas, and iliacus internus muscle, the capsular ligament of the joint, and the round ligament were ruptured, and dissolved into

matter, the cartilage of the head of the thigh bone, and that of the acetabulum, were corroded, and the bony surfaces were rough from caries. From all these circumstances it appeared, that the disease originated in the cavity of the joint, that an abscess formed in that part, either from inflammation proceeding from external injury, or from the parts being from a previous scrophulous taint, predisposed to this disease."

This case of Cocchius, shews an instance of the hip disease, which frequently occurs. It holds out a proper caution to patients, who are predisposed to this complaint by a strumous habit, to avoid such situations as may expose them to external accidents, and consequently to an aggravation of the disease. It also shews, like many other cases which are recorded, the fatality of the complaint, when an external abscess takes place, and particularly, if that abscess is made the object of surgical operation.

The foregoing cases of the disease of the hip joint, were principally selected from the great variety, presented for admission at the Westminster General Dispensary. It would have been easy to have added many more, as patients labouring under this disorder, apply in great numbers, to institutions of a similar nature to that, with which I was for many years connected. They are in a great measure excluded from hospitals, both on account of the length of time, which their cures require, and likewise from the indispensable necessity of having as good air, as the metropolis affords, to cooperate with, and facilitate the means used for their recovery. It has been my study, not to obtrude a multiplicity of cases, resembling each other in their leading circumstances. Those which are stated have been selected with a view of shewing the origin, progress, and termination of the complaint; its general effects when left to the powers of nature alone; and the beneficial consequences, likely to result from the efforts

of medical and furgical aid, feafonably administered.

I flatter myself, that an attempt to explain the pathology of a difeafe, in the treatment of which I have been long converfant, will neither be confidered as prefumptuous, nor condemned as unfervicable. At all events an endeavour to draw the attention of furgeons to a fubject fo important, and engage them to the confideration of the various means ufed for the relief of a diforder, fo frequent in its occurrence, and fo pregnant with dangerous confequences, cannot be deemed an undertaking ufelefs in its tendency, however defective it may be in its execution. It fhall certainly be my future ftudy, to avail myfelf of every opportunity which may occur of rendering thefe obfervations lefs imperfect. But the difeafe itfelf is fo protracted in its duration, and complicated with fuch a variety of weighty circumftances, all-demanding the ferious notice and mature confideration of an attentive practitioner, that it perhaps requires more time, and greater experience to elucidate

the subject fully, than can fall to the share of any one individual.

It would be very desirable to know, what are the symptoms which indicate such a happy termination of the disease, without the interference of art, as has been described in the twelfth case.

It would be also very fortunate, if an uniform mode of practice could be ascertained, so as to prevent, invariably, the calamity of an external suppuration, proceeding from caries, or from a strumous affection of the joint.

To find out, with certainty, the remote cause of this disease, is an object of rational and useful inquiry, as there is not, in the whole circle of human maladies, any one, with respect to which there is a greater necessity of applying the wise and salutary mode recommended in the Latin proverb,

Venienti occurrere morbo.

Above all, it would be of the greatest consequence, by the help of frequent dissections, to fix upon true principles, the morbid anatomy of the hip joint, as well as that of every

other joint, in its earliest state of disease. Opportunities of investigation can happen but seldom; it is the duty therefore of every surgeon to avail himself of all those which offer. It is the misfortune of mankind, that practice is too often founded upon a vague and uncertain description of diseases, whilst labour, attention, and perseverance; might have introduced precision, and certainty.

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SECT. VI.

Remarks on White Swellings of the Knee, and on the Caries of the Joint of the Wrist, with Cases; to which is annexed, a Case of Incurvation, and Caries of the Spine.

Observations on the Use of Caustics, in White Swellings of the Knee.

WHEN a remedy has been experienced to be productive of good effects in any one disease of dangerous tendency, it becomes the duty of the practitioner, to apply it to those which seem to be of a similar nature, and especially to such, as have hitherto resisted the usual means of relief. The white swelling of the knee is a complaint, similar to the carious incurvation of the spine, and to

the caries of the hip joint. If its progress be sometimes different, and if its fatality be occasionally more obvious; although at other times, it may seem to yield more readily to the methods adopted for its cure, the reason for such a diversity in its progress, and event, will probably be found in circumstances attending its local situation, and not in the original nature and cause of the complaint.

The practice of the Greek surgeons, for this disease of the knee joint, was to make topical issues by the actual cautery, and since experience has fully shewn the propriety of the revival of that practice for the relief of the carious spine, under the form of a potential cautery, carious joints in all parts of the body, and particularly that of the knee, have been again subjected to this treatment. It is well known now, however, that the application has not been equally fortunate in ailments of the knee joint, and an eminent physician has imputed this failure, and want of similar success, to the distance of the part

affected, from the center of the circulation*.

In a paper, published in the *Medical Facts*, Vol. IV. p. 158, the failure seems to be more easily and better explained, by stating the difficulty of applying the caustic near enough to the diseased part. Proceeding on this opinion, the author directs the application of the caustic to be made on the integuments, covering the external condyle of the thigh bone, as being most contiguous to the parts affected with disease. The result of this practice is communicated in three cases, and, although they were not all finally successful, so as to restore the limb to a perfect convalescence, they serve, nevertheless, to shew the advantage of topical issues, and, particularly manifest the propriety of using them as near as possible to the seat of the disease.

I have for many years applied caustics, both above and below the internal condyle of the thigh bone, for white swellings of the knee,

* See Vol. III. of Mr. Earle's edition of Mr. Pott's works, p. 498.

with various success. I have remarked that where this plan disappointed my hopes, and where a suppuration of the joint took place, notwithstanding this mode of treatment, that the inflammation in almost every case arose, and that the matter collected, generally made its way outwards, on the external side of the knee. Observing this fact repeatedly, I was led to conceive; that the caustic in the manner I used it, checked the progress of the disease as far as it had influence, but that its influence was not sufficiently powerful to pervade the whole cavity of the joint.

Since the publication of Mr. Crowther's paper, I have, in a bad case of white swelling of the knee, made two large eschars, above and below the external condyles of the thigh bone, in addition to two others, which I had before made with the lapis infernalis, on the inside of the joint. The patient soon felt a suspension of pain, and some abatement of the swelling, from this appli-

cation, and the progress of cure appears to be going on favourably.

It may be apprehended, that there are other very material circumstances, which operate to the disadvantage of this remedy, when applied to the caries of the knee, or of the ankle joint. The circumstances I here allude to, are, the pressure which the diseased part receives from the weight of the trunk; and the muscular motion to which it is naturally liable, and which it unnecessarily receives, from the exertions of the patient. To these causes principally, in addition to what Mr. Crowther has suggested, may be ascribed much of the frequent ill success which attends the treatment of diseased joints, in the lower extremities.

Notwithstanding these objections to its use, the application of caustics, in white swellings of the knee, is found to be a remedy of great efficacy. In many cases, it claims a decided preference to blisters, irritating plaisters, or sinapisms, the surgeon being enabled at the same time that he is pursuing

a rational plan in using caustics, to employ also other efficacious means. He is not precluded from availing himself, of the use of topical bleeding by leeches, of frictions of mercurial ointment, of fomentations of sea water, or of the solution of sal ammoniac, of the plaister of gum ammoniacum, and squills, or even of blisters.

The cases of white swelling of the knee, in which I have found the application of caustics completely successful, have been those which are described by Mr. Bell, as rheumatic white swellings, where there has been little, or no fluctuation of fluid in the cavity of the joint, and no discoloration of the integuments but where an enlargement of the knee has taken place, attended with great pain in moving the part, and sometimes a total inability of motion.

In such cases, patients have often previously complained of weakness, and pain in the joint, which has probably subsisted for a long time, coming on at intervals, increased by sudden changes of the weather, and aggravated by

flight external accidents, but these symptoms having been considered as rheumatic, have not been much attended to.

In such cases, particularly in adult subjects, when the disease has increased, so as to require surgical assistance, copious and repeated bleedings by leeches, and the application of caustics, have seldom failed to produce a complete cure. But when the patient was very young, and of a scrophulous habit, or when the accumulation of fluid in the joint, whether matter, or glary fluid, was considerable; or when the patient, perversely, or indiscreetly accustomed himself to move the limb, in order to prevent a stiffness, or contraction of the joint, I have seldom seen more than temporary relief procured by this, or indeed by any other method of treatment. Such cases have finally terminated, either in a contracted, ankylosed joint; or symptoms have come on, which have produced the unhappy alternative of resigning the limb by amputation, or of giving up every hope of

The period of life most favourable for the treatment of the white swelling of the knee, has been, as far as I have observed, in a middle state, from twenty to forty-five years of age. In very young children, a carious state of the bones which form this joint, too often terminates unsuccessfully. The disturbance, to which the parts are liable from their natural restlessness, or from the frequent motion to which, at their early age, they are subjected by the officiousness of their attendants, occasions more irritation to the part affected than adults are likely to receive, who are easily persuaded to adopt a state of quietude for the benefit of the diseased limb. In very old subjects, the circulation is too languid to admit of much hope of success; and in women, during a state of pregnancy, or of lactation, the process of cure goes on very unfavourably.

CASE I.

*A White Swelling of the Knee cured by Issues
made by Caustic.*

In May 1787, John Hennis, thirty-four years of age, a tall thin man, of a fallow complexion, with dark hair, and black eyes, naturally subject to a winter cough, was recommended to the Westminster General Dispensary, for a strumous enlargement of the testis, for which he underwent the operation of extirpating the diseased part. A fortnight afterwards, he complained of uneasiness in his right knee, which was found to be swelled, and painful, particularly on the inside of the patella; the leg and thigh were soon after wasted, and the knee was strongly contracted, with a total inability of extending the joint, or of moving it, without the utmost pain.

For a few days, I ordered it to be fomented, and poulticed, but seeing no prospect of amendment, I proceeded to the topical application of leeches, which were repeatedly put on to the number of forty, and I afterwards blistered the whole knee three times. These means proving also ineffectual, I rubbed the lapis infernalis half an inch above, and half an inch below the joint, on its internal part, so as to produce an eschar; on the removal of which there were two large issues capable of holding ten peas. It was remarkable, that this man felt an immediate suspension of pain, from the application of the caustics. After the first night, he slept well without laudanum, although, during several preceding nights, the pain had been so excessive, that it could not be palliated by opiates. Six months elapsed before he was perfectly well. He has preserved the use of his limb, so as to pursue his business at this time as a brewer's servant; the issues were kept open for eighteen months, and during

that period, he felt inconvenience whenever they were neglected.

In the year 1791, the man applied again for assistance, for a chain of diseased glands in his neck, which extended from ear to ear. These swellings after a long time suppurated, and he recovered also from this strumous attack. On the 19th of March 1799, I saw him again, and found that he remained perfectly well.

CASES II. III. AND IV.

Three Instances of White Swellings of the Knee Joint, cured by Issues made by Caustic, and by repeated Bleedings with Leeches.

In the month of June, 1791, I was desired to visit Mrs. Squires, wife of Mr. Squires, wine merchant, in Catherine Street, near the Strand. She was thirty years of age, of a pale, unhealthy aspect, but had enjoyed a tolerable state of health, till she was attacked with a violent pain in her knee, in the pre-

ceding month of February. This pain had continued increasing, and when I saw her, the leg and thigh were emaciated, the knee was swelled, exceedingly painful, and contracted so much, that it was impracticable to extend it, without giving her the most exquisite pain. She had applied a variety of fomentations, and poultices to the part, and used many internal medicines, without any benefit; the only resource, which she found for alleviating the pain, was in large doses of laudanum. The limb could not be moved in the bed, nor could she bear the pressure of the bed cloaths on the part; there was however no fluctuation of fluid in the joint.

I ordered twelve leeches to be immediately applied to the knee; these were repeated in a few days, and afterwards a large blister was laid over the whole diseased part. This mode of treatment was continued for three weeks, during which time there was but little remission of the symptoms; her knee remained exceedingly painful, and she could not be removed from the bed. The quan-

uity of laudanum, however, had been diminished. A plaister, composed of gum ammoniacum and the vinegar of squills, as recommended by Dr. Swedjar, was next applied to the knee; this was renewed several times, and the composition made as stimulating as possible by the addition of powdered squills; it gave much local irritation, but the knee remained equally painful, swelled, and contracted.

Two large issues were then made above, and below the knee, by penciling the integuments with the lapis infernalis; I called upon her in a few days after, and found her easier. She was now directed to keep a pillow under the knee, and to extend it as much as possible, without using violence. The issues soon discharged freely, and their surfaces were frequently sprinkled with powdered cantharides.

I attended her for four months, and had the pleasure of seeing her perfectly recovered. During the time of my attendance, upwards of five hundred leeches were applied to the

knee, and to the discharge of blood, procured by them, she attributed her recovery. Whenever she felt any increase of pain, recourse was had to this mode of bleeding, which always relieved her. The issues, were kept open for a year afterward; in December, 1792, they were dried up; she has now the perfect use of her joint, and is able to walk several miles in the course of the day.

Mrs. Roffe, wife of Mr. Roffe, timber merchant, in Princess Street, St. Ann's, Soho, had for some years been subject to a pain in the knee, which was increased on every change of the weather, after undergoing any uncommon fatigue, or meeting with any accidental fall, to which the weakness of the joint made her very liable. She sent for me in December, 1791, at which time, the complaint ^{was} growing much worse, she could not stand on the limb, it was extremely painful, much contracted, and every effort to extend it, produced a considerable increase of pain. The limb was wasted both above and below the part affec-

ted, but her health in other respects was perfectly good.

I ordered the part to be bled with leeches, afterwards a strong solution of sal ammoniac was applied to it; this treatment was continued for several days, without any visible sign of amendment; and repeated blisters were also employed without any advantage. I then made two issues, as in the foregoing case, the good effects of which were quickly obvious, from the remission of the pain, and from the power of extending the limb being restored to her. She had more than seventy leeches applied to the knee, recovered entirely in three months; and is at this time perfectly well, but still keeps one of the issues open.

In this case, as well as in the preceding one, very little medicine was given; the former patient was of a debilitated habit, and reaped great advantage from preparations of bark. The last mentioned patient was of a full, plethoric constitution, and the cure was promoted by a low regimen of

diet, and the occasional use of aperient medicines.

On the 19th of March, 1790, Mary Custer at No. 20, St. Alban's Street, Pall Mall, forty-two years of age, was recommended as a patient to the Westminster General Dispensary. I was informed that she had been confined to her bed for four weeks, on account of a painful swelling of the knee joint, which had been considered as rheumatic, and that leeches, and cataplasms, had been repeatedly applied to it. I found that her general health had been always perfectly good, but that for some time past she had been subject to a weakness in this joint.

This last attack had come on suddenly, after some fatigue in her business, which was that of a laundress. The knee was considerably swelled, and so irritable, that it could not be moved from the position in which it lay, without the utmost pain, nor could she suffer the weight of the bed cloaths to press upon it. If it was attempted to be

raised in the most gentle manner by the heel, the pain was insufferable; the skin appeared shining, and tense on the knee, and the limb was wasted, both above and below the joint.

I directed ten leeches to be instantly applied, to the most painful part of the joint, and the following day it was covered with a large blister. This plan of topical bleeding and blistering was continued for two months, during which time, seventy leeches and six blisters had been applied, at the end of that period, I found the pain of the joint was greatly removed. The knee, however, remained swelled, and was totally incapable of motion. On the 24th of May the caustics were applied as in the foregoing cases; in three days she could move the limb with some ease, and from that time, a favourable alteration was evident.

In the middle of June, she could put her leg, and foot to the ground, and could bend, and extend the joint with great facility. She kept seven peas in each issue, but as the

joint became stronger, she gradually lessened the number of the peas. On the 1st of August, 1792, this patient called upon me, and said her knee was perfectly well, that she could walk several miles in the day, without inconvenience, and that she kept the lower issue open with three peas only. No internal medicines were used in this case, excepting, occasionally, a solution of common purging salts.

CASE V.

An Instance of Curies of the knee Joint, cured by Anchylosis, the Limb, during the Progress of the Cure, being carefully kept in an extended Position.

MRS. MORTON, at No. 138, Swallow Street, a thin, delicate woman, thirty years of age, subject to no particular chronic disease, was seized on the 5th of August, 1789, in the night, with a violent pain in the knee,

attended with a fever, which was considered as rheumatic. The following day, finding herself unable to walk, and that her knee was much swelled, she applied to an apothecary in the neighbourhood, by whose advice, she was bled in the arm, and had six leeches applied to her knee; fomentations, cataplasms, and a volatile embrocation were also applied to the part affected.

On the 20th of August, she was recommended to the Westminster General Dispensary, and the knee was found to be considerably swelled, exceedingly painful, incapable of the least motion, or even of bearing the pressure of the bed cloaths; there was no external inflammation, but, evidently, a collection of fluid in the joint. I directed leeches to be again applied, and cloths dipped in a strong solution of sal ammoniac to be constantly kept wet on the knee; gentle saline laxative medicines were also used, as she had a symptomatic fever. This method having been continued for ten days, without producing any good effect, the so-

lution of sal ammoniac was left off, and the part was rubbed twice a day, with half a dram of strong mercurial ointment, to which were added five grains of camphire; during this treatment, the swelling in a small degree diminished, but the pain in the joint continued.

On the 15th of September, I rubbed the lapis infernalis, above, and below the joint, so as to produce an eschar, at least one inch in diameter, and formed an issue in both places, capable of holding ten, or twelve peas.

On the 16th of October, there had been no benefit derived from this management of the case, except that the fluid in the joint seemed to be in some measure absorbed. The pain in the knee was still violent, the leg, and thigh much wasted, the ancle œdematous, and the slightest motion of the joint was attended with the most excruciating pain. The friction of the mercurial ointment was continued, and the issues discharged freely.

November 10th, the same plan was con-

tinued, with the occasional use of the bark, as she was inclined to colliquative sweats at night. The limb began to contract with the knee bent, a position, which usually takes place in the white swelling of this joint; she kept it, however, resolutely extended, counteracting the tendency to flexion; by bolsters placed underneath the knee.

On the 20th of December, the swelling of the joint was abated, her general health was much mended, the limb was still wasted, but by grasping her thigh with both hands, it was found that she was capable of moving the whole lower extremity. The foot was affected by this motion, being turned inward, or outward, as she directed the rotatory motion of the thigh, a proof, that an anchylosis was forming in the knee joint. She continued to preserve a horizontal position, and to keep the limb steadily extended.

On the 18th of January, 1790, she attempted to get out of bed, but in consequence found the knee much worse, and the symptomatic fever renewed. Being now sensible,

that her cure depended principally on rest, she lay quietly for two months longer, at the end of which period she was occasionally taken from the bed, but many months still elapsed, before her limb was in the least serviceable.

She walked afterwards for eighteen months with crutches, and her recovery seemed to be retarded by some unfortunate circumstances. The husband was poor, and obliged to move his family to different parts of the town, she was twice pregnant during her illness, and observed to me, that her knee never grew stronger, when she was with child, or giving suck. She was once recommended to dry up her issues, but found the knee in consequence much weaker. She at several times applied to irregular practitioners, who advised her to endeavour to move the joint, and administered their specific oils for that purpose.

Time, however, has satisfied her of the necessity, of preserving the firm coalescence in the joint, which nature has formed. The

limb is perfectly ankylosed, the union between the condyles of the thigh bone, and the upper head of the tibia, being complete. She is capable of walking several miles in the day, without much inconvenience, but does not yet trust herself in the street without a stick, although in going about the house, she does not avail herself of that assistance. She is now accustomed to the inconvenience of a stiff joint, but in walking cannot move the limb in a plain rectilinear progression, but describes, as it were, the portion of a circle, much in the same manner as those do, who have a wooden leg.

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*Remarks on the Caries of the Joint of the
Wrist, with Cases.*

IT has been well observed, by Mr. Justamond*, that it is one of the greatest desiderata in surgery to be able, either to assist nature in the formation of an ankylosis, or to form one by the assistance of art, where nature does not seem disposed to do it. This is a remark, to the truth of which every practitioner will accede, although the difficulty of accomplishing either of these objects must be acknowledged. It is, perhaps, easier to say, what kind of surgical practice will not assist nature, in effecting the process of ankylosis, than to explain in what manner surgical means can assist her, in forwarding it.

The opening into diseased joints, the passing of a seton, or the injecting of fluids into their cavity, will certainly not aid the

* See Justamond's works, by Houlston, p. 229.

convalescence of the part. The formation of ankylosis is a process of nature, in which she is herself the chief agent, in the relief of disorders otherwise incurable. But here however, it should be observed, that ankylosis, under the usual acceptation of the word, is not to be always considered as a cohesion of the extremities of bones. In some instances it is produced by the rigidity, or strong contraction of muscles, the bones and cartilages which compose the joint, being considered as free from carious taint. In this view of things it is of the utmost importance in surgery, to ascertain the propriety of giving motion to joints, or of refraining from such attempts, where there is a disposition to ankylosis.

If this tendency to ankylosis be created solely by the contraction of muscles, the attempt to produce motion is obviously useful; but, on the contrary, if the difficulty in moving the part, and the pain which accompanies this endeavour, be caused by caries, it must be considered, whether every effort of this kind does not aggravate the original disease, by

exciting inflammation, and causing the secretion of matter; both of which circumstances have a material influence in producing an unfortunate termination of the malady. But a state of quietude in this case, favours the operation of remedies, gives time for the resources of nature to take place, and even if the caries should be so far gone, that ankylosis must unavoidably be the only means of cure, it suffers that natural process of the constitution to go on to its completion, in the speediest and best manner possible.

There is no joint in the body more subject to caries than that of the wrist; from its situation, and from the number of small bones, which compose this joint, it is exposed to a variety of accidents, which bring on diseases of bone. Notwithstanding this propensity, it more easily admits of cure, when it is affected by caries, than many other joints. It is without difficulty kept in a state of quietude, and not having any pressure to support from the trunk, the usual means adopted for checking the dispo-

sion to caries, are often successful; and even if the progress of caries be farther advanced, so that an anchylosis becomes necessary to preserve the limb, this joint, as well as that of the elbow, is most easily susceptible of that advantage, and a very useful limb is often preserved, although a considerable destruction of bone and cartilage may have taken place.

CASE I.

~~A~~ ~~B~~, Servant to a gentleman in Portland Place, suffered a slight contusion in the palm of the hand, by bruising it with an iron skewer. She felt no immediate inconvenience from the accident, and, as there was no external wound, pursued her usual business. The following day, her hand was slightly swelled, and when I saw it a few days afterwards, the swelling extended up the fore arm, but affected principally the wrist, the back of the hand, and

fingers, which were all œdematous. There was no tension of the skin, inflammation, or tendency to external suppuration, but she complained of a violent pain in the joint of the wrist.

Fomentations, and poultices of various kinds were applied for several days, and anodynes constantly administered, but no remission of pain could be procured. Strong solutions of sal ammoniac were also used, but with no advantage, and on examining the limb, I found a crepitation in the joint of the wrist. Mr. John Howard, of Argyle Street, at this time saw the case with me, and with his concurrence, a large blister was applied round the joint. The pain was in a few days alleviated, and the swelling began to subside, after the repetition of a few blisters. In about six weeks, the abrasion of the cartilages could be no longer felt in the joint, and she soon after completely recovered the use of her hand.

CASE II.

MARY JONES, thirty years of age, was admitted a patient to the Westminster General Dispensary, September 11th, 1792. She had not been subject to any particular disease, although she did not appear to have been a strong, and healthy person. Her only complaint was a swelling of the wrist, attended with violent pain, and total inability of motion in that joint, and those of the fingers. The cause assigned, was a strain which proceeded from the wringing of wet linen. She was suddenly waked in the night subsequent to the accident, with excessive pain in the part, and from that time, the limb remained swelled and œdematous, from the ends of the fingers to the elbow. In this condition she continued for two months, during which time the part had been constantly fomented, and various poultices had been applied. At length, large doses of laudanum were

used, which were the only resource, adequate to procure temporary alleviation of pain.

The first day, she was recommended to the charity, six leeches were applied to the wrist, and the following day a large blistering plaister round the joint, which did not relieve her materially, and she was still obliged to continue her opiates. The violent pain she suffered, made it impossible to move her from the bed, so that the part had every advantage, likely to result from an undisturbed position.

During the course of my attendance on her, which lasted four months, I found that the swelling and pain gave way gradually to a repetition of blistering, and topical bleedings. The blisters were renewed ten times, and she informed me, that one hundred and fifty leeches had been applied. The recovery was very slow, and although at this time, which is a year since the first attack of her disorder, she has the use of her wrist, in a great degree, and can bend, and extend both that joint, and her fingers in some measure, there

are evident marks of partial ankylosis, particularly, between the first bone of the thumb, and the wrist.

CASE III.

MARY COLLINS, servant to Mrs. Campbell, in Suffolk Street, Marylebone sixty years of age, a woman healthy in every respect, received a slight injury in her thumb, by pricking it with a pin, as she was washing linen.

The following day, she felt a violent pain in that joint of the thumb, where the hurt was received; the third day, the whole arm swelled, from the fingers upward to the shoulder, with violent pain round the wrist, which seemed to be principally affected. A fever came on, attended with rigors, which lasted for three days; at this time, she had a very assiduous attendance from her apothecary, and fomentations, and poultices were applied.

I was desired to see the case a few days afterwards, and found the whole arm extremely swelled, painful, and totally incapable of motion. The skin was of a purple hue and in some parts, there were vesications rising on its surface. She had languid appearance, great dejection of spirits, and her pulse was quick, and low.

From the age of the patient, and from the local appearances, there was great reason to apprehend, that a gangrene might occur. In order to obviate this, as the greatest evil, a cordial plan of diet, and a free exhibition of the peruvian bark, with laudanum were continued, as they had been, before I saw her, administered by Mr. Bacot, her apothecary, and a cataplasm of linseed meal was applied to the part affected. This was so far successful, that we soon had the pleasure of observing a suppuration take place in various parts of the arm.

The joint of the wrist was however found, on the bursting of these abscesses, to be quite carious; the abrasion of the cartilages of the

joint was indubitable, the crepitation of the bones was heard, and a total inability of motion in the fore arm was obvious. The raising it even for the purposes of cleanliness was impracticable, without giving great pain, and was therefore avoided.

I considered that rest was the only mode of preserving the limb from amputation, and the patient submitted to a treatment, which was not attended with pain, easily giving up circumstances of convenience, for a prospect of permanent safety; she lay in bed for three months with her arm supported on a pillow, the external applications being retained by the eighteen-tailed bandage, by which means the upper or outer part of the arm was opened occasionally, to examine the state of the wounds, without disturbing the position of the limb, whilst the abscesses, which had burst on the internal or lower part of the wrist, were not attended to.

The result of the case was that after four months close confinement, she recovered, with the hand entirely ankylosed in the wrist

joint, although some little motion remained in the fingers, but it was scarcely sufficient for any useful purpose. She has however, the satisfaction of having avoided an operation, which, considering her advanced period of life, and the particular circumstances of the case continually threatening a gangrene, would probably have terminated unsuccessfully. To those who attended the progress of the disease, it afforded the gratification of observing, that a carious state of the bones of the wrist, even in old age, is not absolutely incurable, and that the resources of nature in those cases, when favoured by a perfect state of rest, and aided by diet, and medicine, are almost inexhaustible.

CASE IV.

A Caries of the Wrist cured by Anchylosis, or Cohesion of the Bones, taken from Mr. David's Memoir, on the Effect of Motion and Rest; addressed to the Royal Academy of Surgery at Paris.*

“ A Man, about fifty years of age, applied to me in 1770, with the bones of the wrist so carious, that in two or three places, one might pass a probe through them, by following some fistulous openings that presented themselves on the outside. The wrist, and the hand, which were œdematous, considerably swelled, and of a dark blue colour, seemed to require amputating so much the more urgently, as the patient was tormented with a slow suppuratory fever. It was even the advice of a man, skilful in the profession, not to defer having recourse to this last resource. Notwithstanding this, I ventured to

* See Justamond's works, by Houlston, p. 200.

temporize, and after having applied the usual dressings for two days, I carefully closed all the fistulous openings, with dressings that were not irritating, and the hand and wrist being covered with compresses dipt in a balsamic and spirituous embrocation, made with the yolk of an egg, oil of roses, and brandy, I placed them in junks. The parts being thus kept in a perfect and constant state of rest, I made no scruple of leaving the first dressings on for ten days without a renewal, more especially as neither the pain, nor the discharge, required them to be removed sooner, and even at this time it was curiosity, rather than absolute necessity, that was the motive for my doing it. As I found the discharge less in quantity, thicker, and less fetid, than when the patient was dressed every day, I judged it proper to put off the removal of the second dressings for twenty days, and at this period, the swelling of the hand and wrist were half reduced, and every thing seemed to bespeak, as much from the patient's countenance and pulse, as from the

nature of the discharge, that hopes might already be entertained of a fortunate termination of this dreadful disease. In about two months and an half after this, these hopes were completely realized ; for then all the fistulous orifices were perfectly cicatrized, and the cure was terminated, with no other inconvenience to the patient except loss of motion in the wrist, which has not since prevented him, from doing his usual work."

CASE V.

THE disease represented in the seventh plate, is a caries of the joint of the wrist, cured by the operation of nature, in uniting together the carious bones. The caries seems to have comprehended the first joint of the thumb, as well at the carpal bones, the joints of the fingers remaining free from ankylosis. I have no particular account of the complaint, but it evidently serves to shew the coherence of bones ; it establishes too, the

complete effect of that process, in a very complex joint, and will readily impress the mind, with the great hazard, which this salutary effort of nature would undergo, if subjected to an injudicious interference from art, and not suffered to continue in the quietest state possible, and in the position most favourable to its gradual accomplishment.

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Case of incurvated and carious Spine.

THE carious spine represented in the eighth plate, is an instance of the powerful tendency of nature to form a coherence between the ulcerated surfaces of bones. In this case, there were ten diseased vertebræ, between all of which the intervertebral substance was totally destroyed. Several of these were partially, or completely united by ankylosis; others had suffered more considerably from the caries, great part of their substance seeming to have been absorbed, as no sensible exfoliation had taken place, during the life of the patient. These bones are in some measure loose, and detached from each other, yet, from their roughness, and the ragged appearance of points shooting out from some part of their surfaces, it is clear that the

efforts of nature were strongly exerted toward forming the same union which had evidently taken place in others ; and this would probably have been effected, had it not been for circumstances, which attended the management of the disease. The patient was a tender and emaciated infant, living in a close and damp place, very unfavourable for a recovery from a strumous disease. He was frequently moved, and taken up from the bed ; yet notwithstanding this treatment, he lived a considerable time, and at last died of the small pox. When he was five years of age, he was admitted at the Westminster General Dispensary in March 1789, for a carious incurvation of the spine. It was observed, that the disease had not the usual angular incurvation,* which appears when a

* Besides the absence of the usual angular projection, when a great number of the dorsal vertebræ are affected with caries, or its usual forerunner, destruction of the intervertebral substance ; it may be remarked that this symptom does not take place when the disease affects the lumbar vertebræ, and seldom when the cervical vertebræ alone are diseased. This consideration is of great importance in investigating the cause of those paralytic and other diseases which may be

few only of the vertebræ are affected, for the whole spine was bent in the form of a bow.

Issues by caustics were made near the most projecting part of the spine, but they were of no use. An abscess formed, which burst during the month of June following, and continued discharging till November, when he died of the small pox. The disease in his back did not seem to have had any influence in the fatal termination of the variolous infection.

The appearance of this disease, naturally gives rise to a few reflections on the treatment of the carious spine. It exhibits an unfor-

supposed to have their origin in affection of the spine. The long spinous processes of the dorsal vertebræ are turned downwards, and overlap each other, and when therefore the body of the vertebra is destroyed by caries, the superincumbent weight of the trunk, causes the spinous process to rise up, and form the projection which is called the incurvated spine, in those cases when only one or two of the vertebræ are diseased. But as the spinous processes of the cervical are nearly, and the lumbar vertebræ are quite horizontal, this alteration of their position cannot take place, and we frequently see very extensive caries of the lumbar vertebræ in cases of psoas abscess, without its having been manifested by any derangement in the external form of the spine.—E.

tunate proof of the difficulty of curing this complaint by means of art, and at the same time affords the consolation of shewing the great efforts, which nature is capable of making towards the reunion of parts, separated by disease.

It shews the great mischief which pressure, motion, or friction must create on the parts affected. It moreover suggests the great probability that injury would result from the use of spinal machines, were they even capable of effectuating an extension of diseased vertebræ. To procure by sudden, or yet by gradual exertions, an elongation of a carious spine, would, it seems, be acting diametrically opposite to the only possible mode of relief. It would be a preposterous effort to tear away that coherence by which the cure is naturally effected and only tend to a farther division of parts, where approximation is principally wanting, and in a natural course of being accomplished.

This statement of the great difficulty of curing such a disease of the spine, as is here

represented and illustrated by plate VIII, does not however, argue the impropriety, or reprobate the practice of surgical attempts to cure it, by the use of issues made by caustic. It is however clear from the case exhibited in the plate; and what I have stated from a careful review of it, that such issues cannot be considered as neverfailing expedients. Whoever thinks, that in every case of incurvated spine from caries, he shall succeed by the most judicious application of the caustic, will find himself disappointed. It must necessarily have failed in this patient, from the great extent of the caries, unless it had been thought adviseable, to have applied the caustic in several places, over the morbid parts.

There are besides various other circumstances which will occasionally frustrate well meant, and even very promising attempts to cure the spinal disease in question, by the use of issues made of caustics. They must fail of success inevitably, if the caries of the anterior part of the body of the vertebræ,

affects the viscera, which it frequently does, from the nearness and contiguity of the parts. I have seen also more than one instance, where the carious bone has injured the lungs, and rapidly produced a pulmonary consumption. Moreover, in very young subjects, issues made by caustic very often become useless, from the motion injudiciously given to the diseased part; and in old people they fail too, for want of sufficient vigour in the constitution to produce anchylosis.

In subjects from the age of twelve to forty years, issues seem to succeed best, and to be most servicable, where the incurvation is angular, and confined to only a few of the vertebræ. The higher the incurvation has been in the column of bones which form the spine, the more successful has been the use of the caustic, as far as I am enabled to judge, from my own practice and observation. In one of the worst cases of this disease which ever occurred to me, with respect to its debilitating effects, the incurvation was in the superior vertebræ of the neck; the upper

and lower extremities both became paralytic, but the complaint was soon cured by perseverance in issues made by caustic*.

It has happened to me so frequently, to observe, that this mode of treatment has been particularly successful in those cases, where a paralytic state of the lower limbs, was added to the other inconveniences of the complaint, that I have been induced to think, that this paralytic symptom, alarming as it is, conduces nevertheless to the recovery of the patient. Without doubt, this circumstance of the paralysis indispensably compels the patient to a state of quietude in an horizontal position, whereby the pressure of the head is entirely taken from the distempered bones, and the establishment of an union between their ulcerated surfaces becomes thus more practicable, than it otherwise would have been. Consequently the weak state of the limbs, with other symptoms of general disease, sooner disappear.

* See Mr. Earle's edition of Mr. Pott's works, Vol. III. p. 459.

Towards this recovery, the issue made by caustic essentially contributes, being an efficacious mode of checking an external suppuration, which would otherwise ensue from the natural progress of caries. I cannot therefore help considering the use of them as highly proper in such a case, to gain this most important benefit. For although such an abscess in the back, according to Hippocrates, as quoted by Mr. Pott, may relieve the paralysis of the limbs, yet it will almost constantly lead on to hectic fever, marasmus, and death,

A P P E N D I X.

THE following observations were received from a friend, to whom I submitted my doubts on the translation of the fifty ninth, and sixtieth aphorisms, of the sixth section of that work of Hippocrates; they are so immediately connected with the subject of the foregoing pages, that I think no apology can be necessary for their introduction in this place. Every attempt towards illustrating any passage of a writer, to whose labours mankind is so much indebted, will be favourably received by those, who know how to appreciate their value.

“ Dear Sir,

I was not at first aware, that there was any novelty in my explanation of the aphorism of Hippocrates, which you wish me to support : on closer examination, at your desire, not finding any various reading in the original, to justify a diversity of translation, I was surprized at my disagreeing so materially with a variety of interpreters. It certainly is not in favour of my interpretation, that there are among the translators, with whom I cannot agree, several of the medical profession, who may be supposed more competent to decide on the sense of an author, whose writings are peculiarly in their own line of study. I may therefore be thought to pride myself in opposing men of learning and celebrity, by contending for the propriety of a new translation ; but I would fain believe that I have outlived such vanity, and, having been long in the habit of judging for myself, I am certain I can differ in this, as I do in more important points, with any person

whatsoever, without the slightest degree of contempt, or animosity. I proceed therefore, without much concern, to state, as I think it incumbent on me, the grounds of an opinion, which I cannot yet see any satisfactory reason to relinquish.*

! May it not be fairly taken for granted, from the uniform frame of man, that both the symptoms and effects of the disease, to which the aphorism refers, have ever been the same in all ages, and places of the world? Is there any reason to believe, that the human structure in general, or that this particular disease, were not the same in Greece, at the time of Hippocrates, as they are in England at the present day? I have read carefully all the cases of this complaint which you have recorded; but cannot re-

* De translatione Hipp. Aph. XLVII. Sect. V. per Almeloveen, post plerosque interpretes reddita, sic scriptum invenio; "Hoc sensu Œdipo opus est qui "explicet." De translatione Hipp. Aph. LIX. Sect. VI. dictum puta. A. de Haen "Ratio Medendi, &c. Lugduni Batavorum 1761, p. 277. Nide ibidem p: 85, De Galeno.

collect a single one where you say, on your own knowledge, "That the head of the thigh bone fell out of its socket, and fell into it again, *before* a suppuration had taken place."

If it has happened, "That the head of the thigh bone has fallen out of its socket, and fallen into it again," *after* a suppuration; this is foreign to the present purpose, for the aphorism evidently relates, and is strictly confined to a period of the disease, antecedent to suppuration. The word *suppuration* is, I conceive, used here with sufficient perspicuity, and strict medical propriety. I have, however, expunged it from my translation of the 59th aphorism in the first edition of this work, in consequence of considering what Mr. Crowther has said in objection to it, although it was not entirely to my own liking, I adopted it on consulting Dr. Johnson's Dictionary. The doctor there defines the verb "to suppurate," *to grow to pus*; and gives the two following significations to the noun "Suppuration;" 1—*The ripening*

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 or change of matter into pus; 2—The *matter suppurated*; and for his authorities refers to Dr. Arbuthnot, to Wiseman, and Dr. South.

Certainly the word *Suppurationes* in the Latin translation of the 59th aphorism, inserted in the preceding edition of Mr. Ford's book, was intelligible in the same sense, as *mucosæ*, and was meant to be understood precisely in the same signification. This was evident from the reference fairly given to Fæsius, and Gorræus, and will appear still more clearly in the sequel. Nevertheless to avoid cavilling about words, the use of it may as well be discontinued, as the very same interpretation may easily be given, intelligibly enough, in a simple plain way.

Leaving then all medical considerations, and as much as may be, all medical terms, to medical men, I shall endeavour to give, and to support, in the same sense as before, an interpretation of the Greek original, with equal fidelity, and greater perspicuity; subjoining in notes, the authorities, and illustrations on which it is grounded; and the principal reasons that incline me still to

adhere to it, notwithstanding the ungraciousness of its novelty, and the unpleasant imputations of *presumption*, and *pertinacity*.

Aph. 59. Ὀκόσοισιν ὑπο ἰσχυιάδος ἐνοχλημένοις
 χρονίης ἐξισταίαι το ἰσχίον, ἢ πάλιν ἐμπῶπει, τειρείοσι
 μύξαι ἐπιγίνουσαι.

Aph. 60. Ὀκόσοισιν ὑπο ἰσχυιάδος ἐνοχλημένοις
 χρονίης το ἰσχίον ἐξισταίαι, τετείοσι τήκηαι τὸ σκέλος, ἢ
 χλωῶνται ἢν μὴ καυθῶσιν.

HIPP. APH. Sect. VI. 59, 60.

Aph. 59. “ Morbo coxario diuturno labo-
 rantibus, femur* exstat, et retro incidit, his

* To prove that Hippocrates used the word ἰσχίον very laxly, I referred, above fourteen years ago, as I do now, to “ Foefij. Oecon. Hip. *sub voce*, and to Gorraei Opera, edit. Parisij, 1622, p. 275, *sub vocibus*, ἰσχίον et ισχυίας. Hippocrates used it, I conceive, in great latitude, and in various acceptations, not merely as it is strictly defined by Dr. Parr, in his excellent dictionary, to signify “ the ligament which retains the head of the thigh-bone, in the *acetabulum coxendicis*,” but also to denote *femur*, *nates*, *coxa*, or *coxendix*, i. e. to signify the thigh, and all parts of it, the hip, the hip-bone, and the hip-joint.

In this very 59th aphorism, it appears to me to be used in two different significations. 1. ἰσχίον signifies the *hip-joint*, and in that sense, it is the nominative to the verb ἐξίσταται. 2. ἰσχίον signifies the *hip*, and in that sense with the addition

“ humores, nimij, pituofi, lenti, albi, contra
 “ naturam superveniunt*.”

“ In such as labour long under the hip-
 “ difeafe the joint ftands out before †, the

of *ωαλις* in the fenfe of *retro*, “ behind,” it is likewise the nominative to the verb *ἔμωπιωμι* and denotes the falling in of the *nates*, or *hip* behind, one of the characteristics of the difeafe, properly represented in Mr. Ford’s first engraving, and copied faithfully in Mr. Crowther’s third plate. See Mr. Crowther’s “Practical Observations on the Difefe of the Joints, commonly called White Swelling, &c.” p. 278. *ἰσχυριον* in the fignification of the *hip-joint*, or *hip-bone*, cannot truly be faid to “fall in behind,” but *ἰσχυριον* in the fignification of *nates* or *hip*, certainly does “fall in behind;” and to this falling in behind, it feems to me, that Hippocrates here alludes, and if fo, the aphorifm evidently refers to that precife early period of the complaint, when this falling in of the *nates* or *hip* behind begins to be observable, and characterifical of the hip-difeafe.

* This is precifely the definition of the original word *μυξα* given in the very words, both of Fæsius and of Gorræus *sub voce*. As Gorræus thinks the Latin word *mucus*, or *mucor*, equivalent to *μυξα* doubtlefs “*mucoreſ superveniunt*” would be the moſt concise Latin tranſlation of this part of the 59th aphorifm; but as *muci* or *mucoreſ* would ſtand nearly in as much need of explanation as *μυξα* in preference to either of the words themſelves, the unexceptionable definition is given warranted *ut ſupra*. See Fæſij Oecon. Hipp. p. 254, as quoted by Mr. Crowther in his “Practical Observations on the Difefe of the Joints, commonly called White Swelling,” pp. 281, 282.

† *ἔξεισθαι* *exſtat*, not *excidit*, “ſtands out,” not “falls out,” for if Hippocrates had meant to ſay *excidit*, “it falls out,” it is moſt probable he would have uſed the word *ἐκπίπτει* in di-

“hip falls in behind*, in them purulent
“matter is supervening.”

rect opposition to *ἰμπερὶν* which he afterwards uses to signify
“it falls in,” *incidit*.

* Πάλιν retro, “behind;” this Greek word, sometimes
synonymous with *οπισω* as certainly signifies *retro*, *retrosum*,
and *contra*, “behind,” “backwards,” “on the other side,”
and “on the contrary side,” as it does *sursum* and *iterum*
“again”

Such as have any doubts on this point may be amply satis-
fied by consulting *Stephani Thes.* or *Constantini Lexicon*, or
Fæsiij *Oecon. Hipp. sub voce*. I renew here, perhaps needlessly,
my former references to the confirming testimony of Galen, on
the authority of R. De Haen, “Ratio medendi, &c. ut supra,”
p. 85, and to the subsequent decisive passages of Aristophanes,
and of Homer. See Aristoph. “Aves,” l. 2, and l. 648,
where *πάλιν* is unquestionably used for *οπισω*, *retro* “behind,”
edit. Rich. Franc. Phil. Brunck, 8vo. 1783.

In the *Acharnenses*, l. 1179, *ωαλινορον* occurs in the
same sense. I refer likewise to a *Scholium* in the Basil edition
of Aristophanes, 1547 fol. p: 368, on the first quoted passage
of the “Aves,” l. 2.

Add to all this an extract from the ingenious and accurate
remarks of Lennep on the word *πάλιν*. “Ceterum propria
vis hujus voluæ [*πάλιν*] clare sentire potest ex illo *Iliad. Z.*
lin. 189.

——— Τοι δ' ἔτι πάλιν δικάνοε νεογιο.

Πάντας γὰρ κατέπιφθεν ἀμύμων Βελλεροφόντης.

Hi vero nequaquam retro domum iverunt,

Omnes enim interfecit eximius Bellerephontes.

Retro, p. p. retrogado motu (ut verbis utar Hoogevenenij.)
Adde imprimis *Iliad.* A. 380; A. 214 E; : 257, &c:

Jno. Daniel, A. Lennep “*Etymologicum Linguae Græ-*

Aph. 60*. Morbo coxario diuturniore la-

ca." Pars prior. Traj. ad Rhenum, 8vo. ciciocccxc.
p. 727-8.

H. A. 380.

Κατόμενος δ' ὁ γέρονι πάλιν ἄχθῃ.
Iratus itaq; fenex retro abivit.

CLARKE.

H. A. 214.

———— πάλιν ἄγεν ὀξείας ὕγκοι.
———— retro curvati funt acuti hami.

CLARKE.

H. B. 257:

Τέτω δ' ὁ πάλιν αὐτίς ἀποίστιον ὀκίς ἴσπου.

Hos autem non iterum retro auferent veloces equi.

CLARKE.

* *Μυξα*, "Matter;" this generic term is adapted in the translation as being a plain English word, little liable to objection, and applicable to every species of impure fluid, or unnatural moisture in the sockets of the joints, by what name soever medical men judge most proper to denote it.

In reliance on Dr. Johnson, and his authorities from Drs. Arbuthnot, Wifeman, and South, in the former edition of this work the word *suppurationes* was used to signify "a gathering of matter," but that the translator understood the word *μυξα* precisely in the sense put upon it by Fæsius and Gorræus, to whom I referred the reader then, as I do now, conceiving *suppurationes* to be to the full as intelligible as *mucos*, and "suppuration" to be equivalent to "mucous secretions," it was nearly as evident then, as it can be made now, to any reader not in such haste to censure, as not to stop to understand.

"It is really (says Mr. Crowther) a matter of astonishment that an appeal should have been made to the works of GORRÆUS."

borantibus, femur exstat, his tabescit crus, et claudi fiunt, nisi usti fuerint.

It appears to me still more astonishing that Mr. Crowther should have turned to the references, and not have discovered that they were purposely appealed to, in order to shew that the translator put the very same meaning on the word *μυζαι* which is given there, and in the propriety of which Mr. Crowther himself acquiesces.

Mr. Crowther's astonishment would have abated on observing that while I adapted the same meaning given by Goræus, to which I fairly appealed, I only happened to consider *suppurationes* and *mucores* as synonymous terms, and put the very same sense on the one that he himself put upon the other, and so preferred *suppurationes* as being plainer, to *mucores*, that required definition, as much as the original word itself.

With this slight verbal difference, our agreement upon the whole in the very same meaning of *μυζαι* being sufficiently clear, Mr. Crowther's long learned dissertations on suppurations might have been spared, or shortened at least, as being at best a mere logomachy, and an unnecessary fight with his own shadow.

It might have fully answered his purpose, and been no prejudice to his argument, if Mr. Crowther had just remarked, that though I considered *suppurationes* and *mucores* as words of the same import, or very nearly so, yet in the medical acceptations of these words, there was a difference between them, that made the latter in this case preferable to the former; and that it was evident the translator, not being a medical man, was not aware of the distinction.

The truth is, that at the time, above fourteen years ago, no plain English word occurred to my mind, that I thought so expressive of the meanings of *μυζαι* and *mucores*, as *suppurationes*, and I was, as has been said, confirmed in adopting it, by what I found in its favour, in Dr. Johnson's dictionary, and his medical authorities.

“ In such as labour longer under the hip-

The English word *MUCK* suggested itself as the only derivative from the Greek root, and the nearest of kin to *μύξα*; 'tis precisely the very thing in Arabia; but it was obviously not admissible here. The other various significations of *μύξα* for various they are, deny it who will, were as little to my liking: The *humor de naribus*, “the snout of the nose,” was not suitable; the *ethickinium lucernæ*, “the matter about the wick of a lamp,” would not do in this case; nor the *mucor in testudinibus*, “snail slime,” and even the best of them, the *mucus in ostræis*, oyster juice, was not in season.

But seriously, if Mr. Crowther, or his friend, had taken the trouble to turn to the word *μύξα* in the *Thesaurus Stephani*, or the *Lexicon Constantini, Hederici, &c.* HE OR WE must really have found various significations of it, upon authorities that it requires other kinds of arguments than a gross denial, or an *ipse dixit*, to set aside. Who can help supposing that such extreme caution (to adopt Mr. Crowther's own words) “must have originated in inadvertency, inaccuracy, or want of due examination.

But, as I would fain avoid a war of words, I take this opportunity of explicitly declaring, that when I used, about fourteen years since, the word *suppurationes* instead of *muci*, or *mucosæ*, I meant then, as I do now, by the words, “superveining purulent matter,” a gathering of such superabundant, phlegmatic, clammy, and unnatural white fluid, as before described by Fæsius and Gorræus, whether it be called *pus* or *mucus*, without entering in the least into the complex notion of purulent matter, “ill founded as it possibly may be.”

These are the words of Mr. Ford, with whom I lived more than thirty years in the habits of intimacy and friendship. He was long eminent and useful as a practical surgeon; and I transcribe from his work what follows marked with inverted commas.

“The necessity of entering minutely into the distinct pro-

“ disease, the joint stands out* ; in them the
“ joint wastes, and they become cripples, if
“ not cauterized.”

“ perties of *pus* and *mucus*, as to any great and obvious advantage in the practice of surgery, is by no means evident to my mind ; especially as a fact most important in pathology, is proved by daily experience, that this fluid, whether termed “ *pus* or *mucus*, is capable of being absorbed into the circulation, without any inconvenience to the parts on which it is deposited, and of leaving them when the absorption has taken place, in a state still proper to resume their local functions, &c.” See the former edition of Mr. Ford’s “ Observations on the Disease of the Hip-Joint, &c.” pp. 83, 84, and 85.

As I happened to be pretty well acquainted with the book I quote from, before it was visible in print, Mr. Crowther will see that my worthy friend had not left me altogether ignorant that medical gentlemen made a distinction between *pus* and *mucus* ; he will see, likewise, from the quotations and references above mentioned, that although a medical gentleman himself, of great respectability, he did not think the distinction very well founded. “ This distinction (says Dr. Parr) is difficult, but experience will often detect a difference to which words are inapplicable.” — “ The nature of *pus* is still involved in considerable obscurity, and we can only offer some approaches to the knowledge of it.” Med. Dict. *sub voce*, *PUS*.

* *ἔξισται* is here translated as in the preceding 59th aphorism, in this verb’s signification of *exflare*, “ to stand out,” and not in its signification of *excidere*, “ to fall out.” When a word admits of various acceptations, surely it may, and surely it ought to have that interpretation which best accords with the meaning of the author who makes use of it.

It being more familiar to me in my line of life and study,

“ If (says Mr. Crowther, p. 280,) I speak
 “ confidently in favour of the former transla-

may I not be indulged in illustrating the propriety of this optional mode of interpretation, not indeed from Hippocrates, or any classical Greek writer, but in a similar instance, strictly relative to a verb of this same Grecian family, that occurs not seldom in different significations, in the Greek text of the New Testament.

Budæus, a phenix in science, and more peculiarly in Greek literature, in his admirable *Comment. Ling. Græc.* now before me, with his own MS. notes, p. 404, ed. Bradij, A. D. 1529, states on the best authorities, a variety of senses in which ἵστημι *sto*, “ I stand,” and its συνδρα, *Eξισμοis deliquium*, “ a fainting away, or a swoon,” *Eξισταμαι*, &c. has been used by pure Greek writers.

This unquestionably pre-eminent Greek scholar informs us, that *Eξιστημι* is used in various acceptations, and particularly in the two following significations: 1. It signifies *furere*, or *mente alienari*, “ to be mad, or to be beside one’s self.” 2. It signifies *deficere*, or *deliquium pati*, “ to swoon, or faint away.”

Let us now try to adapt the optional interpretation of this verb to the best meaning of a passage where it occurs, in Mark iii. v. 21.

Shall we at once adhere to the common old translation?
 “ They went out to lay hold on him, [Jesus Christ] for they [his friends] said, “ He is mad,” *furit*, or, “ He is beside himself,” *mente alienatur*. Or shall we reject, merely on the account of its novelty, the following equally fair interpretation of *Eξιστη* which gives a widely different meaning to this passage of the Evangelist? “ They went out to get him into their possession, for they said, ὅτι *Eξιστη* “ He is quite exhausted,” *deficit*, or, “ He fainteth,” *deliquium patitur*. The context countenances and ascertains the propriety of this translation of “ *Eξιστη* “ He is faint for want of food.” And when his friends or

“ tions, which have, until the publication of
“ Mr. Ford’s book, been received and con-
“ sidered, with no essential difference, as ex-
“ pressing the true meaning of these very
“ aphorisms, I am justified by finding, that
“ GALEN, and every commentator on the
“ works of Hippocrates, are in support of my
“ convictions, in favor of the old trans-
“ lations.”

Until Mr. Crowther shall have happily illustrated the sense, and verified the truth of the “ former translations,” his merely speaking ever so confidently in their favour, and asserting, what he could not well know, their general reception, as “ expressing the true meaning of these very aphorisms,” that is a *petitio principij*; the *ipsum το κρινομενον*, but mere assertions are not good arguments. The old translators,

kinsmen heard of it,” [of what did they hear?] the foregoing verse 20, informs us; “ And the multitude cometh together again, so that *they could not so much as eat bread.*” Which, then, of these two optional interpretations of Εξερσ gives the most satisfactory meaning? *Utram harum mavultis, nihil ad me attinet*: I am only to judge for myself, and to leave others at equal freedom; their judgments may very probably be better, but nevertheless, I must follow my own.

therefore, and commentators, even if Galet were at their head, can ill *support*, and never *justify* Mr. Crowther's convictions, in favour of their translations. Let us keep to the original words of Hippocrates himself, in a consistent persuasion, "that the meaning of "an author can only be ascertained by what "he himself says on the subject." If he has not ascertained his own meaning clearly, there is free room for conjectural interpretation of his words, if we give him all reasonable credit, due to his character, for competent information with respect to a subject on which he was writing expressly, in the plenitude of his medical knowledge, which has acquired him the honourable title of "Father of Medicine."

I shall now state fairly, such of the "former translations" as I have seen, and submit them to the consideration and free judgment of the reader. I shall give the various Latin translations of these two aphorisms in the very words of the translators themselves, that if there be any inaccuracy in my rendering the sense of them into English, of which I am

not sensible, it may be discovered, and rectified, by collation with the Latin originals subjoined. Their full import, however differently expressed, may fairly be translated in this manner.

Aph. 59. When persons are distressed with a lingering disease in the hip joint, the thigh bone, or the top of it falls out of its proper place, and again falls into it ; in them mucous matter is collecting.

Aphor. 60. In such as are vexed with a lingering complaint in the hip, the thigh bone falls out of the socket, in them the limb, thigh, or leg wastes, and they halt, limp, or grow lame, unless they are cauterized.

Aphor. 59. Quibus a diurno coxendicis morbo vexatis, coxa excidit, et rursus incidit his mucus innascitur.

Aphor. 60. Quibus a diurno coxendicis morbo vexatis, coxa excidit, his crus tabescit, et claudicant, nisi uesti fuerint.

Hipp. Aphor. Glasguæ. Ann.. 1748

Janfonn, Almeloveen.

Aph. 59. Quibus longo coxendicum dolore conflictatis, femoris summum coxa excidit, rursusque recidit, iis mucosus innaſcuntur.

Aph. 60. Quibus diurno dolore Iſchiadico vexatis, femur excidit, iis crus contabescit, et claudicant nisi urantur.

Hipp. Aph. Vorſtij Ludg. Batav.

Ann. CIΩICXXVIII.

Aph. 59. Quibus ab iſchiade diurno vexatis, iſchium e proprio loco excidit, atque rursus incidit, iis mucosus innaſcuntur.

Aph. 60. Quibus diurno iſchiade vexatis, iſchium excidit, iis crus tabescit, et claudicant nisi urantur.

Translatio Charterii

Aph. 59. Quibus longo coxendicum dolore conflictatis, femoris summum coxa excidit, rursusque recidit, iis mucosa ibidem pituita colligitur.

Aph. 60. Quibus diurno dolore iſchiadico vexatis, femoris caput coxa excidit, iis femur contabescit, & claudicant nisi urantur.

Translatio Hollerii.

Aph. 59. " Quibus diuturnis coxendicis
" doloribus implicitis caput femoris excidit
" coxa, rursusque recidit, ijs mucus ibi con-
" geritur."

Aph. 60. " Si dolor coxarius fuerit diu-
" turnus ac tum his si femoris caput coxa ex-
" cidit, his crus extenuatur, et claudicant nisi
" urantur."

Translatio Hearnij, M. D. Lugd. Bat.
A. D. MDCXXXVIII.

The following English version of Aph. 59,
is copied verbatim from Mr. Crowther's
book on "The Disease of the Joints, com-
" monly called White Swelling, &c." 8vo.
1808, note, p. 292.

Aph. 59. " In whatsoever persons afflict-
" ed with a disease of the hip-joint of long
" continuance, the hip-joint stands out (from
" its usual situation) and falls back again into
" it; in them mucores, or mucous secre-
" tions, are attendant symptoms."

Dr. Falconer thinks these two aphorisms
" have been mistaken by the translators who
" have expressed themselves as if there was an

“ entire dislocation of the head of the bone,
“ when the word* implies no more than a
“ projection, which is indeed a partial disloca-
“ tion.”

The Doctor has not himself given, strictly speaking, his own translations of the aphorisms, either in Latin or in English. I shall give here however, in the Doctor's own words, what he seems to have considered as true English versions of them.

Aph. 59. “ The meaning of Hippocrates
“ is, I think, clear enough, that if the head
“ of the thigh-bone be at first considerably
“ protruded, or as he expresses it, ‘ stands
“ out,’ and again sinks back (suddenly is, I
“ think, implied) into the socket or acetabu-
“ lum, it indicates a suppuration to have
“ taken place.

“ And this I take to be true, provided, as
“ we may reasonably suppose, that Hippo-
“ crates meant, that there be no general
“ amendment or abatement of the symptoms.

* *ἔξισταται*—*exstat*—stands out or projects—literally translated.

“ The membranes, which were at first thick-
“ ened by inflammation, and which thrust
“ the head of the bone outwards, being melt-
“ ed down by suppuration, allow it to fall
“ back again into the socket, from whence
“ it had been pushed by the thickening of
“ the periosteum, or of the lining of the
“ cotyloid cavity.”

Aph. 60. “ The succeeding aphorism
“ implies no more than that hip-cases of long
“ continuance, accompanied with a projection
“ of the head of the bone, are apt to induce
“ lameness and wasting of the limb, unless a
“ cautery be used.”

Not to travel out of the record, or to venture a single step into the land of medicine, which to me is all a *terra incognita*, I would have put a full stop at the word place. There is even then too much for any thing deserving the name of a simple translation, and too little for any thing like a luminous paraphrase. As for the medical guesses and glosses that follow, by way of commentary, a mere Greek scholar, confined solely to the precise Greek

text, has nothing to do with them. *Ne futor ultra crepidam.* They may, however, be very clear, and very precious to gentlemen in medical departments, and, as from the fugitive nature of their publication in a pamphlet, they may not even now, or very soon, be easily found, they are all correctly re-published here, from pages 40 and 41, of “A Dissertation on ISCHIAS, or the Disease of the Hip-
“ Joint.”

Whether *Ἰσχιας* means precisely the disease of the hip joint, which is the subject of your observations; or whether the two preceding aphorisms are to be considered as a statement by Hippocrates, to signify that matter is supervening or to notify two leading symptoms indicative of a growing or gathering of purulent matter likely to ensue, I do not impertinently interpose any opinion. These are points which I leave entirely to the determination of medical men.

It is chiefly concerning the sense of the first of the two aphorisms, namely, the 59th of the 6th Section, that I cannot help differ-

ing from the interpreters, whose translations I have not intentionally represented either unfaithfully, or unfavourably; and the following, and the foregoing notes, and observations, seem to support, and confirm sufficiently, the exposition to which I give the preference.

It seems to be well ascertained that in an early state of the hip disease, the hip bone stands out before, or according to the preceding translations, faithfully quoted, falls forward from its socket. But whether it be really a certain fact that the hip bone “falls into its socket *again*,” at the same, or indeed at any subsequent period of the disease, after much fruitless enquiry, I am still to learn; and so it seems are fundry very respectable, and much respected medical gentlemen to whom I have applied for information. I have not been so fortunate as to meet with any medical man, who from his own knowledge has vouched this to be a real fact; and not one of all the former translations that I

have seen takes notice of any “ falling in behind,”

That there certainly is a “ falling in of the hip behind,” is neither denied, nor disputed. Mr. Crowther in his book, p. 278, admits, that “ the falling in of the *nates*, or hip, behind, is one of the characteristics of the hip disease, properly represented in Mr. Ford’s “ first engraving,” and well copied in Mr. Crowther’s third plate.

Now it is to this “ falling in of the hip behind,” as I conceive, that Hippocrates alludes in his 59th aphorism ; thus truly designating what is admitted by all medical men, to be a *concomitant symptom*, or a characteristic occurrence in an early state of the disease, by what name soever they are pleased to give it.

It is not the Ἰσχίον simply, “ the hip bone” that ἐμπίπτει “ falls in” πάλιν *iterum* “ again,” but the Ἰσχίον with the addition of πάλιν in the signification of *retro* “ behind” that ἐμπίπτει “ falls in” *incidit*.

Thus Hippocrates distinctly points out both *what* falls in, and *where* the falling in is,

and clearly intimates a peculiar early period of the disease, *viz.* when this “falling in of the nates, or the hip, behind,” becomes first observable, or evident.

This, in my opinion, must either be the true meaning of the Greek text, or mark what must necessarily be the consequence of translating it in any of the former ways above mentioned. It is obvious, that according to the former interpretations there is nothing in the 59th aphorism, nor indeed in the 60th, which is supplemental to it, which indicates, or has the smallest reference to the “falling in of the hip behind,” though an early concomitant symptom and characteristic of the complaint to which it relates.

Now is it likely that a constant striking occurrence in the hip behind, characteristic of the complaint in question, and in an early state of it, should have totally escaped the notice of so acute, and so sagacious an observer as the father of medicine seems to have been? Is it probable, or indeed possible, that if Hippocrates had noticed it, he should have made no

mention of it, when writing expressly on the subject? *Cras credam.*

Fabricius, I think, has said, I recollect not upon what authority, that Hippocrates, when he wrote his aphorisms, was an old man, and in the zenith of his knowledge and skill; I quote from memory, but I believe his words are, *Hippocrates senex, et cognitior, aphorismos composuit.*

His 50th aphorism must therefore be translated in the sense I have put upon it, and in an interpretation it will very well bear, “ for “ the meaning of an author can be only as- “ certified by what he himself says on the “ subject.” In all the former translations, “ with no essential difference,” there is nothing said of the “ falling in of the hip be- “ hind,” either in this, or in the following supplemental aphorism. His “ aphorisms” are the only small part of the works of Hippocrates of which I know any thing; and with them I probably should not have been acquainted, but that the copy of them now

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before me, happened to be a new year's gift of a Greek classic, as appears from the hand writing of the very learned donor, dated in 1755, when, more than half a century ago, I first read it *con amore*, more, I confess, for the sake of the language in which it is written, than for the information it contains.

If the "former translations" in favour of which Mr. Crowther speaks so confidently, do really "express the true meaning of the "two aphorisms in question," it is undeniably evident that Hippocrates was either totally ignorant of an early, and a characteristic circumstance of the hip disease, "falling in of the "nates behind," or if he really knew of it, as he doubtless did, there is not the slightest mention of it, in any of the "former translations "of these two aphorisms that I have seen."

Mr. Crowther, by declaring his conviction in favour of the interpretations of the old translators, in which he says, "there is no "essential difference, and adopting them as "expressing the true meaning of these very "aphorisms" concurs with them in subjecting

Hippocrates, I think, very unjustly, to the harsh imputations, both of "inaccurate predication, and of deficient information on this subject."

Thus has he afforded an opportunity to me, or any other ignoramus in medicine or surgery, who can but translate two short sentences of Greek into Latin, or English, to volunteer their services, to use his own apposite words, in the laudable, and honourable office of "defending HIPPOCRATES against a charge of professional ignorance, want of sense, and incapacity of prediction, which in my mind is implied, if it could be supposed, that his meaning was in fact, that adopted by Mr. Crowther, and the old translators," with whom he leagues himself. See his book p. 280, and p. 287.

On the borders of four-score, and with my *curta suppellex*, I must reluctantly decline the honour of embracing this golden opportunity, and prudently recollect the wisdom of the old saying, that "a weak advocate may spoil a good cause," seeing too before my eyes, a

glaring instance of the imminent danger of placing myself in a truly "awkward situation."

Mr. Crowther, in his "Practical Observations, &c." furnishes me with considerable consolation under the misfortune of having suggested and supported, what he conceives to be an erroneous interpretation of the two aphorisms, and amazingly injurious to the character of their illustrious author, for whom I entertain the highest veneration, by the following acknowledgment.

"In justice to J. C. it ought to be stated, that a gentleman, pre-eminently distinguished by his profound knowledge of the Greek language, would, when I stated the question, have committed the same error, but for my explications, conceiving that *mucus* or *pus*, might be used indifferently; from this circumstance it may be surely inferred, that however eminent a man may be for Greek literature, he is not therefore sufficiently qualified to judge of medical subjects, unless assisted by other advantages."

The consideration of this passage suggests to me some remarks, and inferences, which I am unwilling entirely to suppress. I will not captiously take occasion here to suppose that Mr. Crowther meant to insinuate, that he himself was still profounder than the pre-eminent Greek scholar, whom he, by his "explanations" happily saved from committing the same error which I have committed, by giving an innocent explanation of a Greek sentence or two, which seems to have offended him exceedingly.

I will not do Mr. Crowther the injustice, which I sincerely think it would be, to put such an unfavourable construction on his words, not intended, I believe, to convey any such meaning. But in consideration of their beneficial effect on a gentleman so highly, and I doubt not, so justly praised, and consequently conceiving that the *explanations* must have been very learned, I for one, regret they are not more explicitly stated, and communicated to the public, with a particular account of the question which he stated to his friend.

The communication of such powerful explanations, would have come too late to have saved me from committing my error, but it might have been a warning, and a salvation to others, and perhaps might have reclaimed me from persisting "pertinaciously" in an erroneous course.

But a clearer and an undeniable meaning of the passage quoted is, that an ignorance of the medical distinction between *pus* and *mucus*, and a supposition of their being synonymous, or very nearly synonymous terms, must constantly lead the best Greek scholars to "commit just such an error as I have committed," and would have led the gentleman "pre-eminently distinguished for his profound knowledge in the Greek language" to have given the same, or similar translations of these two short aphorisms but for Mr. Crowther's *explanations*, which proved a *salvo* in his case, though they failed in mine.

I am very unwilling to advert again to this momentous distinction between *pus* and *mucus*. But as the original date of the aphorisms, and the original date of this important distinction, are

far, very far from being synchronous, I am totally at a loss to conceive how Greek scholars, if they were even physicians, or practical surgeons; could help committing the same error that I have committed, and that Mr. Crowther's friend was in such imminent hazard of committing, during the long, very long interval of time that elapsed from the publication of the aphorisms, before the distinction between *pus* and *mucus* entered into any medical man's head.

I am much inclined to believe that they must have interpreted them in much the same sense in which I have translated them, and in which Mr. Crowther's friend would have better translated them, but for Mr. Crowther's *explanations*, *i. e.* as I conceive, by a satisfactory statement of a modern distinction between *pus* and *mucus*, "ill founded as it possibly may be," of which his friend's profound skill in the Greek language could give him no conception, and of which, as its origination was so long posterior to his time, Hippocrates himself must have been utterly ignorant.

The Greek quotation from some part of Hippocrates' works, given in Mr. Crowther's book, p. 293, and referring to I know not what edition of Hippocrates, p. 411, proves very clearly, that he denoted both the laudable, and the impure fluid in the sockets of joints, by the same common name of *Mυξα* so that he certainly knew nothing of this distinction between *pus* and *mucus*, from which we may surely infer, that the knowledge, and even the belief of this distinction's being well founded, cannot be indispensably necessary to the just understanding, or to the right interpretation of his two aphorisms in question.

It is certainly very true, as Mr. Crowther has discovered, that "no man, however eminent he may be for Greek literature, is therefore sufficiently qualified to judge of medical subjects, unless assisted by other advantages." He may likewise in time be moreover convinced, that no physician, or practical surgeon, however skilled he may be in his profession, is therefore

qualified to judge of points of Greek literature, "unless assisted by other advantages." Would Mr. Crowther have it believed, that his learned friend, who could translate the Greek text of Hippocrates into Latin or English upon sight, *ad aperturam libri*, or that I, who can make a shift, with the help of Lexicons, and long poring over a Greek sentence or two of that author, to understand and to translate them, could, either of us, be so absurd, as to imagine we were therefore qualified to judge of medical subjects which we knew nothing about? *Non omnia possumus omnes.*

'Tis readily admitted, that a physician, or even a practical surgeon, possessed of an acquaintance with their original language, and equal critical skill, is more likely to elicit the true meaning of Hippocrates' aphorisms, than even an eminent Greek scholar, quite a novice in all medical science. But what then? Must it not still be acknowledged, that it is only, and ultimately by an acquaintance with the original language in which they are recorded,

that their meanings can be ascertained, and not by any skill whatsoever either in physic, or in surgery ?

If cases should now and then happen, that translations from the ancient Greek physicians are at variance with the doctrines and theories of modern medical men, and that they cannot any how be brought to tally with each other, is it not full as likely that the medical theories may be unfounded, as that the literary translations may be unfair ? The Greek having now become a dead language, the words of it remain unaltered, and unalterable, while the fashions of medicine and physic are changing, and changeable continually.

Multa me movent ut ita credam, jure, an injuria judicet lector.

Does not Mr. Crowther, in pp. 276, 277, seem to appropriate to himself peculiarly, an opinion, of which no person, who can read the original, is ever likely to controvert the propriety ? Who ever doubted about the 60th aphorism being a supplement to the 59th ? He thinks “ that if Mr. Ford or I had

“ so regarded them, we could not have *possibly* adopted our translations of them.” I verily believe that Mr. Ford admitted this obvious, and proper arrangement of the aphorisms; but I certainly know I did so arrange them more than fifty years ago; nevertheless we adopted the translations, to which, on re-consideration, I still adhere, so that Mr. Crowther, if he never noticed it before, may now see that *impossibilities* sometimes happen.

On the whole, I am at an utter loss to find out on what Mr. Crowther founds his trust, “ that he has shewn the impropriety of adopting either Mr. Ford’s, or his friend’s translations, [and what is still more wonderful] from the authorities which they themselves have produced.” *Practical Observations*, p. 285.

I should be much obliged to any person who would point out to me in Mr. Crowther’s book, a single tittle where he has shewn this impropriety in any degree, or upon any authorities whatsoever, of our having adopted translations, that remain still unanswered, and which

now, by revival, and a stricter adherence to the original text, are rendered less liable to misrepresentation; and I can still more than before venture to affirm, “that there is not a single
“ word in the original text of any importance,
“ which I have knowingly warped, violated,
“ or translated *meo periculo.*”

An hæc sint congrua, et consentanea, lectoris, erit judicium. Sed his diutius immorari, alterius est, et otij, et operæ, quam quæ nostra nunc sunt.

According to this translation, which I conceive to be well supported, the doctrine of Mr. Ford's book, appears to me to be the doctrine of the father of medicine; and the sense and purport of the 59th aph. section VI. just amounts to this, “ In a long hip-
“ disease, the hip-joint stands out forwards,
“ the hip falls in behind, and purulent matter
“ supervenes.”

Hippocrates, a sagacious indefatigable observer, either first made this discovery, or he was instructed in it by Democritus, from whom it is said, he acquired much information, and he

has recorded it for the benefit of mankind, with the philosophical precision of a scholar, and the elegant felicity of a gentleman.

After what has been said of the 59th aphorism, it seems unnecessary to add any thing to what has been stated of the 60th, in the text, and notes, pages 67, &c.

This appendix, with the notes, was communicated to Mr. Ford, in writing, at different times, in the year 1794; January 30th, in the year 1808, March 1; and to his nephew, April 10, 1810, by a sincere friend to the Author, and a real well-wisher to the Editor.

————— *Si quid novisti rectius istis
Candide impertias, si non his utere mecum.*

J. C.

MORE than ten years after the first publication of this work, A.D. 1805, a pamphlet of fifty-five pages appeared, to which the note in page 75th of this edition has a reference. It was written by William Falconer,

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 M.D. F.R.S. Physician to the Bath General Hospital. It is entitled a "Dissertation on
 " ISCHIAS ; or the Disease of the Hip-Joint,
 " commonly called a HIP CASE ; and on the
 " use of the Bath Waters, as a REMEDY in
 " this Complaint."

From the penult leaf of this pamphlet, page 53, I extract what follows, marked with inverted commas.

" Mr. Edward Ford, Surgeon to the Westminster General Dispensary, published, A.D. 1794, a work, entitled, ' Observations on the Disease of the Hip-Joint, &c.'"

" This gentleman has given a good description of the disease, and has added several useful plates, particularly the first, which shews the state of the muscles covering the nates, and those immediately below them, which afford some of the earliest and decisive signs of the presence of the disease."

" His indications of cure appear to me to be proper and judicious. I am, however, inclined to think that he places too much

“ dependance on the benefit to be derived
 “ from issues, and too little on the effects of
 “ the warm bath.”

“ Had he considered Dr. Charlton’s re-
 “ port of the proportion of those benefited by
 “ the warm bath, he would probably have
 “ ranked it higher in his estimation.”

The Editor feels it his duty here to explain a little on the concluding paragraph of this extract, so likely to lead such as are unacquainted with Mr. Ford’s book, to think that he had either neglected to speak of Dr. Charlton’s “ Treatise,” &c. or that he had spoken of it *inconsiderately*. I well know that Mr. Ford was very careful not to overlook any thing then in print, that had the least bearing on the subject of his work, and could be got here. Whatever he discovered relative to it, was sure to be weighed with attention, examined with care, and mentioned with candour.

It was never his way to appropriate to himself a tittle of what he knew to belong to another, to borrow without acknowledge-

ment, or to treat any publication, or its author, otherwise than with generous justice.

Those who knew him will readily concur in this testimony; and those who knew him not, need but turn to the 2nd section of his book, where, particularly from page 44 to page 49, inclusive, they will find ample and satisfactory evidence, that Mr. Ford had *well considered* Dr. Charlton's report, on which it now becomes requisite to remark, as undue stress seems to be laid upon it.

In the first place, it is admitted by Dr. Falconer, that the Bath waters are confessedly prejudicial in every situation accompanied with hectic fever; and in the next place, what Mr. Crowther affirms in his book, page 1, 2, 5, 7, and 258 merits consideration: “ Children are peculiarly subject to the disease
“ in question, and no case has hitherto occurred to me in which the patient was not of
“ a *strumous* habit. Affections of this articulation, (the hip-joint) produced by accident,
“ may not all be of a *scrophulous* nature, but
“ the majority of such cases is undoubtedly of

“ that description.” Consequently by *hectical symptoms*, and *strumous* and *scrophulous* taints, much the majority of patients labouring under the hip disease, can derive no sort of benefit from the REMEDY recommended for this affliction by Dr. Falconer, for the good effects of the Bath waters on scrophulous complaints, is not by any means generally acknowledged ; though the Doctor mentions one consequence attending the use of them, which is really miraculous, if future observation should confirm it*.

“ The first good effects of bathing in the hot
“ bath (at Bath) are to abate the stiffness and
“ pain of the joint, and to afford a greater
“ latitude and extent of motion. This is often
“ perceived after using it three or four times.
“ As the effects of the REMEDY proceed, the
“ foreness and swelling diminish, the nocturnal
“ pain, which is often very distressing, abates,
“ the power of supporting the body on the
“ lower limbs, on the affected side, increases,

* See his pamphlet, entitled “ A Dissertation on Ischias,” &c. pages 22, 28.

“ the legs, whether *shorter* or longer, approach towards their proper dimensions, and the muscles, that were let down and wasted, regain their natural shape, firmness and plumpness !”

As the doctor has excepted all persons distressed with this grievous complaint from the benefit of the REMEDY he recommends, if they have hectic symptoms, in which case it is “ confessedly prejudicial;” he has taken no notice, in enumerating the causes of the disease, of the most usual *scrophulous* nature of it, although Mr. Crowther properly maintains that the majority of the cases of the hip-disease are undoubtedly of that description.

The most numerous class of sufferers from this complaint would therefore, even at an early stage of the disease, undergo the trouble and expence of repairing to Bath in vain; as Dr. Falconer, if he discovered that they were either *hectic* or *scrophulous*, with equal earnestness would recommend them not to make any trial of this REMEDY, “ confessedly prejudicial in their cases,” as it would “ serve only to aggravate their misery, and hasten their dis-

folution," and multiply the deaths from the disease at Bath, to the disadvantage of its reports.

It seems that a trial of the Bath waters is moreover inadmissible, if matter has been formed; or if it be forming soon after their arrival at Bath. "These, therefore, says the
" Doctor should be struck out of the account,
" as proving nothing either of the efficacy or
" inefficacy of the waters. The greatest part
" of them (why did he not say all of them)
" ought not (he says) to have been sent hither
" at all."

Let it be observed, that this quotation from Dr. Falconer's pamphlet, is not introduced here so much to prove, or to disprove the propriety of sending at an early period, this very numerous class of *hectical* and *scrophulous* sufferers from the hip-disease to Bath, as to account for the few instances of deaths from this complaint stated in the Bath reports, on which fallacious argument an undue stress is laid in proof of the Bath waters being a remedy for the hip-disease, of which so many dare

not make trial, but at the certain risk of “aggravating their misery, or hastening their dissolution.”

The following quotations from, and references to the same publication, justify what has been said, and serve to evince, not indeed that the Bath reports are either not fair, or not authentic, but that Doctor Falconer holds them in higher estimation, and draws a conclusion from them in aid of his favourite remedy, that the due consideration of their nature and efficacy by no means warrants.

“*As Bath-waters are confessedly prejudicial
“ in every situation accompanied with hectic
“ fever, we seldom witness the last stage of this
“ disease; such persons being usually sent home
“ as incapable of recovering benefit from this
“ remedy. Sometimes indeed we have been
“ necessitated to retain such distressed objects,
“ until the termination of their miseries” &c.
Again—“ It happens indeed sometimes
“ either from the disease being too far advanced
“ before the patients are sent, or from

* *Ibidem*, pages 9, 10, 27, 28, 32, and 33.

“ the tendency of the constitution to hectic
“ fever, that suppuration will come on in
“ spite of our efforts to prevent it. Such
“ cases being no longer fit subjects for a trial
“ of the waters, are generally sent home, &c.
“ If weather, distance, or the violence of the
“ disease, will not admit of their removal,
“ they remain at the hospital, to pay the last
“ debt to nature, &c.”

Dr. Falconer, in the same publication, page 52, has inserted the following note :

“ Dr. Charlton says, that Dr. Oliver justly
“ remarks, that when the case is recent, and
“ the patient young, our waters (the Bath
“ waters) frequently effect a cure. To which
“ he adds, that when the disease has been of
“ long standing, they seldom do much ser-
“ vice ; and if the parts are much inflamed,
“ but particularly if matter is formed, the use
“ of them is highly injurious. Recent cases
“ in all diseases admit most easily of relief, but
“ in the present, we need not despair from the
“ long continuance only of the disease, pro-
“ vided it has not advanced to the state of

“suppuration and hectic fever. It is not the
“long continuance only of the disease, but
“the advanced stage of it, that renders the
“waters improper.”

Dr. Falconer, in his 33d page, says the register of the Bath hospital is a most accurate and authentic medical record, and from his very competent knowledge of it, and his own very respectable character, there can be no doubt of its being as accurate and authentic as he states it to be.

But taking into the consideration the very many cases in which the Bath waters are acknowledged to be not only useless, but even injurious and prejudicial; and also the great care taken at Bath to prevent any persons from dying there of the hip disease, evinced by the preceding extracts, and references, it is very easy to account for the comparatively few deaths of this nature registered in their records. It might well have been expected that such few deaths should have been still fewer; and on the whole of the argument, the calculations from their tables, instead of

being in favour of the efficacy of the Bath waters in hip diseases, seem rather to prove their inefficacy with respect to the preservation of life in such cases.

From what has been said, I conclude that Dr. Falconer has laid more stress on Dr. Charlton's report than it can fairly bear ; and that Mr. Ford considered it well, and ranked it properly in his estimation. He has said just as much, and just as little *for* and *against* the " Use of the Bath-waters as a Remedy in " the Complaint of the Hip Joint," as his judicious observation in a long and extensive practice warranted him to say, and no more in either way, *pro* or *con*. He could likewise have said, with perfect veracity, that he had no temptation to warp his judgment either for, or against the efficacy of warm bathing.

E.

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EXPLANATION OF THE PLATES.

PLATE I. *See Section I. page 14.*

THIS figure is intended to shew the elongation of the limb, its general emaciated appearance, the flatness of the nates on the diseased side, with other circumstances attending the early periods of the disease of the hip joint.

PLATE II.

This figure represents the limb shortened, and ankylosed, the patient having undergone repeated suppurations from a caries in the hip joint; this and the preceding figures were taken by Mr. Birnie; the first, from a patient, who is now afflicted with the symptoms of disease in the hip joint in its early state, antecedent to an external suppuration and the shortening of the limb; the other from the Case described, p. 169.

PLATE III.

The carious bones represented in this plate, were taken from the patient, whose case is related in the first Section, p. 24.

FIG. I. A, Shews a probe passed into a small hole, occasioned by caries of the cotyloid cavity.

FIG II. B. shews the probe passed through the cotyloid cavity, to the external side of the os. innominatum, where a caries had taken place more considerable, than that in the acetabulum coxendicis.

PLATE IV.

Represents the anchylofis of the hip joint, referred to in Sect. V. p. 164.

A. The spine of the os ilium.

B. The head of the thigh bone, anchylosed in the cotyloid cavity.

C. The trochanter major.

D. Portions of diseased bone, which had united to the thigh bone, and ultimately produced no inconvenience to the patient, as he had for a long time, previous to his death, recovered from the complaint in the hip joint.

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E. The ischion and os pubis, both of which shew evident marks of having suffered great disease.

PLATE V. See pag. 168.

FIG. I. A. Shews the head and neck of the thigh bone, almost destroyed by caries, the remainder of the thigh bone, being free from disease.

FIG. II. A. Shews the cotyloid cavity entirely obliterated.

B. The cotyloid cavity, the opposite side in a sound and healthy state.

C. The os sacrum incurvated in such a manner, as to produce a contraction of the superior aperture of the pelvis.

D. The os pubis, and ischion, shewing evident marks of having been subjected to caries.

PLATE VI. See Case XVI. pag. 181.

FIG. I. A. The head of the thigh bone carious; it appears rough, shooting out into small points which might in process of time have united with the new bone formed in the cotyloid cavity, and finally produced an anchylosis, if the progress of the disease had been favourable.

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FIG II: A. Spine of the os ilium diseased.

B. The cotyloid cavity, entirely destroyed.

C. A mass of new bony matter formed in the cavity, which, like the callus of a fractured bone, would in the course of time, have probably filled up the space, formerly occupied by the head of the thigh bone, and might ultimately have coalesced with it.

D Various portions of the os innominatum affected with caries.

PLATE VII.

Is intended to shew a caries of the joint of the wrist, the bones united by ankylosis: the disease is represented in two figures, in order to demonstrate a complete union of the carious joint.

PLATE VIII.

Shews the carious spine, more particularly described in Sect. VI. p. 241.

A. Carious vertebræ, either completely or partially united by ankylosis.

B. Carious vertebræ, disunited from each other, but evidently shewing a tendency towards a coalescence of surfaces.

C Intervertebral substance not affected by the disease.

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Fig. 1.



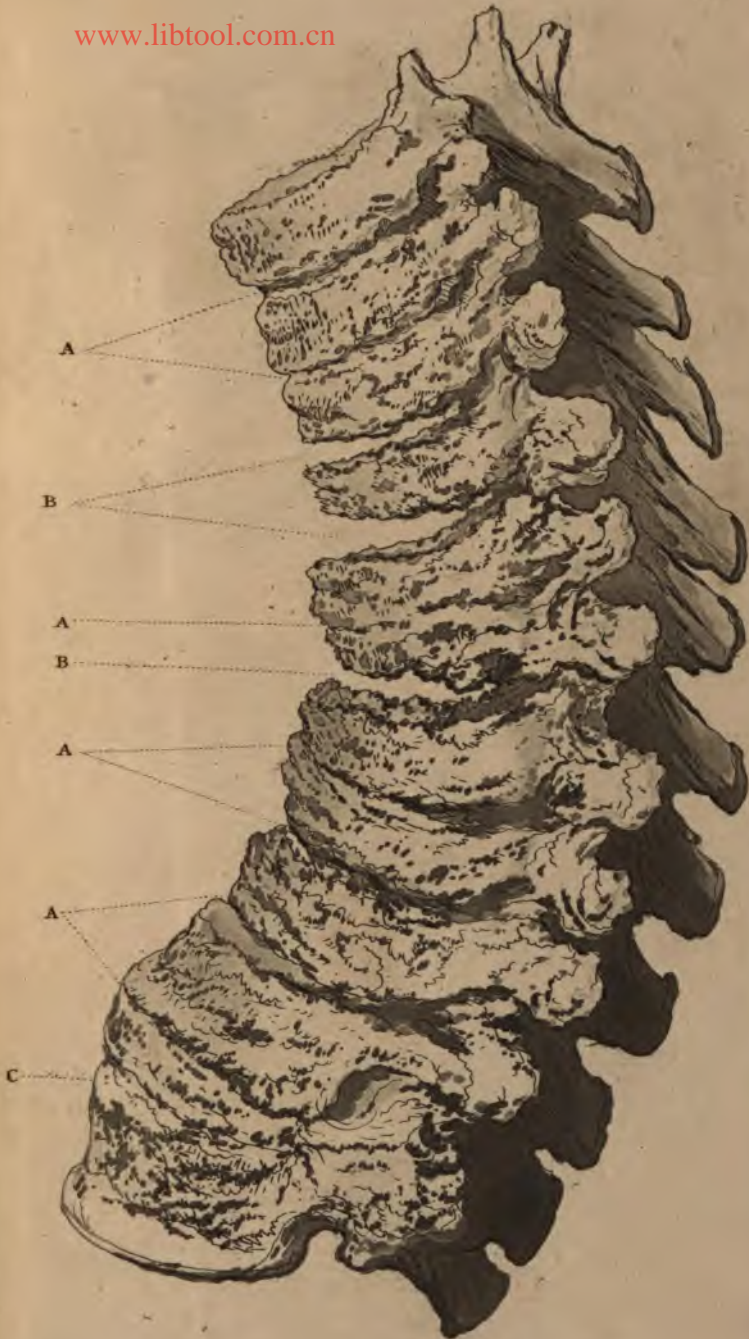


Fig. 2.

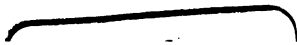




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