CASE
OF
OSSEOUS UNION
OF A
FRACTURE OF THE NECK OF THE FEMUR
WITHIN THE CAPSULE.

By WALTER JONES, Esq., Surgeon,
WORCESTER.

Communicated by EDWARD STANLEY, Esq., F.R.S.

READ NOVEMBER 24TH, 1840.

JENKIN THOMAS slipped down as he was returning home one evening about the middle of October 1838. He was seen on the following day by Mr. Cole, House-Surgeon to the Infirmary, who detected what he considered to be a fracture of the neck of the femur. He applied a splint to the outside of the limb, extending from the pelvis to the foot, and bound the legs together, making use of the left as an inner splint; a bandage was also applied around the pelvis; his chief object having been, as he informs me, to keep the limb of the same length as the other, and to preserve the relative position of the malleoli. He suffered so much pain in the limb, aggravated by a troublesome cough, that he removed the splint and bandages after they had

been applied a few days, which obliged Mr. Cole to reduce the limb a second time, and re-apply the splint. After this, with the assistance of laudanum, to allay the pain and quiet the cough, he went on well. In about eight weeks the splint and bandages were removed, and he was allowed to get up soon afterwards. During the following spring and summer he was able to move about with the assistance of a stick, but with the limb shortened about an inch and a half, and considerably everted. He came under my care as an inmate of St. Oswald's Hospital, 13th January 1840, and died on the 20th April following, of chronic disease of the lungs. At the time of the accident he was more than 80 years of age, and when he died was 82 and 2 months, having lived after the injury a year and a half. He was of small make and short stature, had generally enjoyed good health, worked hard, lived well when able, and drank freely at times ; so active was he at the time of the accident, that he had danced a horn-pipe the same evening.

On dissection, the capsule was found very much thickened, and it was not until the shaft of the bone was divided that the knife could be passed around the joint, so contracted was the space between the trochanter major and the edge of the acetabulum. The direction of the fracture could not be traced, or the bond of union made out, until the bone had been macerated. As portions of the capsule became loose, they were removed with the forceps, which enabled me to discover what I believe to be the

case, that the fracture occurred entirely within the capsule.

Description of the foregoing specimen by Mr. Stanley.

The history of the case is clearly that of fracture of the neck of the femur; the appearances of the bone show that there has been a fracture which has re-united by an osseous medium, and the direction of the fracture is such as, in my opinion, can permit no doubt that it was confined to the portion of the neck of the bone covered by synovial membrane; consequently, that it was wholly within the capsule. The fracture extends through the basis of the head of the bone in the line of its junction with the neck. As in other cases of the same kind, great part of the neck of the bone has disappeared, and, in consequence, the head is proportionately nearer to the trochanter major and shaft of the bone; its re-union has, in fact, taken place in part to the remaining portion of the neck, and in part to the shaft. This union is certainly osseous. In addition to the first maceration of the bone with its surrounding soft parts, it was subsequently immersed for several days in a strong solution of carbonate of potash, and one half of the bone has been boiled in water for three hours without the slightest yielding perceptible in the line of the fracture.

The specimen is preserved in the Museum of St. Bartholomew's Hospital, to which it was very kindly presented by Mr. Jones.