PARTIAL DISLOCATION OF KNEE-JOINT.

TO THE EDITORS OF THE PROVINCIAL MEDICAL JOURNAL.

GENTLEMEN,—If you think the subjoined case of sufficient interest, perhaps you will have the kindness to insert it in your valuable Journal.

I am, Gentlemen,
Yours obediently,
J. BALLARD PITT, Surgeon.

Mattishall, Norfolk, June 7, 1842.

A young lady, on the 2nd of February, produced partial lateral dislocation of the right knee-joint, by falling down stairs with great violence; she was immediately carried to her bed-room, and laid upon a mattress. On examination I found the internal condyle of the femur projecting considerably inwards, and the external tuberosity of the tibia outwards; she shrieked violently, and complained of severe pain, similar to cramp, down the outer side of the leg. Having placed the patient on her back, I made gradual extension and counter-extension, which, together, soon brought the joint into its former position; lateral splints were then put on, and bandaged in such a manner, as to allow leeches and lotions to be applied. The following draught was taken at bed-time:—

Tincture of hyosciamus, half a drachm;
Water, ten drachms;
Syrup of roses, one drachm.

Feb. 3. Passed a restless night; considerable swelling of the joint, with much pain and tenderness, particularly along the course of the internal lateral ligament. Eighteen leeches to be applied, and evaporating lotions, and to take the following draught:—

Sulphate of magnesia, six drachms;
Carbonate of magnesia, half a drachm;
Infusion of senna, one ounce and a half;
Tincture of senna, one drachm.

4. Bowels relieved; did not sleep much; swelling increased. Twenty leeches to be applied, and lotion continued.

5. Complaints of pain, extending up the thigh; bandages loosened; great heat of the joint; swelling and tenderness the same; and a sensation of effusion upon pressing down the patella. Twelve leeches applied, and to take the following pill and draught:—

Opium, one grain;
Calomel, three grains.

An aperient draught in the morning.

6. Symptoms nearly the same, with numbness of the leg and foot.

7. More pain felt on the outer side of the joint. Leeches and lotions continued.

8. Swelling and heat a little diminished, but complaints of a sharp pain near the inner margin of the patella.

9. Pain the same. Leeches and lotions continued, and to take an aperient draught the following morning.

From the 9th till the 15th nothing particular occurred; swelling and pain decreased; and on the 16th I removed the splints, fomented the joint, and made a little passive motion, which caused severe pain on its inner side, and a sensation of stiffness over the centre.

17. Passive motion repeated.

19. Placed the leg over a double inclined plane for a short time. From this date perfect rest was allowed till the 25th, when a little flexion was again tried, and borne with much less suffering. After this period, a little linim. saponis co. was rubbed in daily, and she was put to sit upon the edge of a table, and made to bend and extend the limb several times, which gradually gained strength and freedom of motion. She now protects the joint with an elastic knee piece, and is able to walk comfortably.

REMARKS.

Having treated this uncommon kind of dislocation, I was anxious to publish the details, in order to impress upon the minds of those medical gentlemen who have not seen a similar case, the importance of early and continued application of leeches and lotions, which I consider to be the only safe and effectual means of keeping down the inflammatory symptoms resulting from such a formidable luxation. What ligaments were injured, I cannot exactly tell; but I think the internal lateral, and probably the posterior crucial, suffered in some degree, the cartilages and synovial membrane being of course very much disturbed; the numbness complained of down the leg, particularly on the outer side, must have arisen from some particular pressure or disorder of the peroneal nerve, which I attributed to the biceps tendon. A few days previous to this accident, I reduced a dislocation of the humerus into the axilla, soon after it occurred, with very little trouble; no bad symptoms followed, and the patient soon got well. I merely mention this case, as it afforded me a good opportunity of observing the different symptoms connected with luxations of ginglymoid and ball and socket joints.

SUCCESSFUL APPLICATION OF THE STYPTIC MATICO.

TO THE EDITORS OF THE PROVINCIAL MEDICAL JOURNAL.

GENTLEMEN,—I cannot resist the opportunity kindly afforded me, and cheerfully granted, by my correspondent Dr. Monro, one of the surgeons of the Dundee Infirmary, of bearing testimony to the good effects of the South American styptic "*maticò*," which I distributed among the members of the association at our anniversary meeting last year at York; I therefore send you a copy of his letter to me upon the subject, and you will much oblige me by giving it a place in your periodical.

Yours faithfully,
THOMAS JEFFREYS.

Liverpool, June 9, 1842.

From Dr. Monro, Dundee, to Dr. Jeffreys, Liverpool.

"Dundee, May 28, 1842.

Dear Sir,—I was favoured with your communication containing the "*maticò*" some time ago; I find you are naturally desirous of knowing the result of it in my hands. The circumstance of its being my year to officiate, as attending surgeon to our infirmary, has

given me opportunities of using it more than ordinary in surgical cases. I have not administered it internally, but from what you state I shall certainly take the earliest opportunity of giving it a trial.

It has been very often used after the application of leeches, where there was difficulty of stopping the oozing of blood, and uniformly with the most decided success. One of these cases was that of our house-surgeon, who had fever, and being a young, stout, and florid person, with early symptoms of head affection, leeches were ordered, which, by his own desire, were applied inside of both nostrils; the bites bled profusely, and there was a difficulty in stopping the bleeding. Cold applications to the head, and plugging the nostrils, &c., were tried without effect, when the "maticò," in leaf, was applied over the bites, and pressed on with the point of the finger; the remedy proved immediately successful. This is, in my opinion, a good and decided case, happening in the person of an intelligent and experienced medical man. He describes the feeling produced by the leaf to be, one of increased heat and throbbing, which continued for about five minutes, when all unpleasant sensation went off; others to whom it was applied described their feelings as very similar to those just mentioned. The maticò was also applied to a man brought into this hospital with a wound of the right temple; a considerable branch of the temporal artery had been divided; the wound was dressed, and a compress and bandage applied, but still the blood burst out; cold water was several times had recourse to, still the bleeding returned after a while; at last the maticò was used; at first I stuffed the wound with the powder, but found it not to answer so well as the leaf, being soon washed away from the wound in the vessel; I then pressed in several pieces of the leaves, holding them firmly for some time with the point of the finger; the result was, that we had no more hæmorrhage. We had a somewhat similar case of a man with a wound of a branch of the palmar artery, which resisted graduated compression and bandages; and in which the maticò was used with the best success.

From these cases I cannot doubt but that the maticò has most decided styptic qualities, and that it may become a very valuable addition to our materia medica. It will afford me pleasure if I can give you any farther testimony of the effects of this substance, in which you seem to feel a peculiar interest; I shall persevere in trying it in cases where I think it appropriate, whether medical or surgical.

Mr. Crichton, my successor for the following year in the infirmary, has promised to follow up the experiments with the maticò, and the house surgeon takes an interest in the matter, so that I hope to give you further proof of its good effects as a styptic.

I am, dear Sir,

Yours faithfully,

Wm. Monro."

P.S. I avail myself of this opportunity of recording that my friend, Dr. Kendrick, of Warrington, informed me that he had occasion to apply it to a divided artery in a gentleman who cut his throat, and that it instantly stayed the effusion of blood, which was taking place with considerable violence.

T. J.

ON THE

RADICAL CURE OF HERNIA;

THE SUBSTANCE OF A PAPER READ BEFORE THE HARVEIAN SOCIETY.

By P. BENNETT LUCAS, Esq.,

Senior Surgeon to the Metropolitan Free Hospital, and Lecturer on Anatomy and Physiology at the Westminster Hospital School of Medicine.

The possibility of a radical cure of hernia is admitted by all authors who have written upon this disease, and is acquiesced in by all reflecting and practical surgeons.

Universal as this assent is, it is no less true that out of the immense number of patients afflicted with hernia, who are daily to be met with at our public hospitals, or who present themselves to us in private practice, but a small number holds out to the surgeon a reasonable hope of a perfect recovery by any method of treatment he may adopt.

It has been ascertained, by statistical reports, that about one-sixteenth of the human race is afflicted with hernia. This fact has been arrived at from the reports of the London Truss Society, and from similar institutions; and it is much to be regretted that a more lengthened detail of the cases has not been furnished. It is only by a fair, unprejudiced view of a large number of cases, each individually described—the history of each given—the cause or causes which predisposed to the disease, and which also excited it—the length of time the hernia existed before the patient applied for relief—the condition of the abdominal parieties and their contents—added to the usual inquiries of the age, the sex, and the occupation of the patient—the kind of hernia, and its facility of reduction—it is only by such essential considerations as these that we can select one case from another, with a view to effect its radical cure.

Some years since I was introduced to a medical gentleman, who arrived in this country from America, furnished with numerous testimonials from Professor Pattison and others, in support of his pretensions to cure hernia by the application of trusses. I witnessed some cases in which he certainly succeeded, and others which received no benefit from the means he employed. I was, however, so fully satisfied of the utility of his plan of proceeding, and that it was founded upon correct views of the animal economy, that I did not hesitate to apply a similar method of treatment to two cases of oblique inguinal hernia.

The subjects of both these cases were young men, one aged twenty-six years, the other thirty years. In the elder of the two the treatment failed, but was productive of no bad consequences. The case of the younger forms the subject of this paper.

Mr. A. B., aged twenty-six years, was vaulting into his saddle, when he felt a slight and sudden pain in his right groin, which extended down the outer side of his leg, and was accompanied with the sensation of something having given way. These feelings subsided in a few minutes, and he continued his ride as usual. On his return home he observed a small tumour in his groin, which he considered of so little moment that he continued his daily avocations for a month, and these were the contrary of inactive, before he applied to me.