

Selected Articles.

CONGENITAL DISLOCATION OF THE HIP-JOINT AND CLUB FOOT.

A CLINIC BY PROF. DR. ADOLF LORENZ.

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GENTLEMEN:—I consider it a great honor to appear before you and I wish to thank you very much for your kind invitation. I cannot better prove my gratitude for the honor bestowed upon me than to demonstrate to you, both theoretically and practically, one of my bloodless methods. The most important of these methods, to my mind, is the treatment of congenital dislocation of the hip, a method which I have termed the functional, weight-bearing one. I will be as brief as possible in explaining its principles.

The first step of the operation is to place the head of the femur in the acetabulum. The possibility of this abduction is limited by the age of the patient. In very young children there will, of course, never be any difficulty in pulling down the head of the bone to its proper position. In older children and in adults it is no longer possible to do this. The age limit for this procedure, in cases of bilateral dislocation, is said to be the seventh or eighth year. After this age limit it is necessary, before attempting the reduction, to institute a rather lengthy preparatory treatment, consisting of extension and tenotomy. The age limit in cases of unilateral dislocation is about the tenth year. The oldest case in which reduction was performed was a patient of twenty-three.

To accomplish the reduction, all the soft parts, especially the long muscles of the thigh, must be stretched so as to overcome their resistance. The abductors offer the greater resistance. In former times I used to incise them, but I found that at one time I would cut too much and at another not enough. Besides this, I found it unwise and inexpedient to have two wound cavities communicating with each other. Therefore, I resorted to subcutaneous myorrhesis, that is, to subcutaneous severing of the muscles by overstretching them and by massaging them with the sharp edge of my hand. The anterior group of muscles come next in point of resistance. The posterior muscles offer the least resistance, and this is easily overcome by simply straightening the knee with the leg in extreme abduction. After it becomes possible by this manipulation to pull down the