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Lectures on Joint Diseases.—By LOUIS BAUER, M.D., M.R.C.S., England.

III.

CLINICAL CHARACTER OF JOINT DISEASES.

(Continuation from page 440.)

The division of joint diseases into acute and chronic forms, is rather inappropriate, because artificial. It is apt to confound the character of the affection, and has no practical value in any respect. Whether the duration of the malady, or the violence of the symptoms is the principle of division we shall find neither to be tenable.

Almost every joint disease assumes a *protracted course*, and is thus essentially *chronic*. But few exceptions can be adduced to this rule. Rheumatic synovitis may be of short duration, and characterized by violent symptoms, but joints thus affected will require months to recover their normal status. On the other hand, we observe periods of acuity, in the most chronic and protracted joint diseases, which may challenge the most acute forms known.

I suggest, therefore to drop a clinical dogmatism, worthless to the experienced surgeon, and confusing to the novice.

The symptoms by which *synovitis* is characterized, materially vary, both, in duration and intensity. We need scarcely adduce the general symptoms of this disease, having already alluded to them on a prior occasion.

The chief, and pathognomonic phenomenon, is *effusion within the articular cavity*, and rapid change in the contours of the joint. From the physiological character of the structure, effusion, should, a priori, be expected, as clinical observation substantiates it.