

inserted into the root of the trochanter major, and intertrochanteric line, have by the separation of these parts from the shaft of the bone, now ceased to influence its movements—so that in these accidents we find the foot may be inclined in either direction—its position remaining in whatsoever way the limb may have been placed. There is now no great prevailing muscular influence, permanently to command or preserve the direction of the foot—nevertheless, it may be remarked, that in all these cases, where the amount of injury has been so great, that intense pain and suffering shall be caused to the patient upon the least movement of the limb, this will often be a powerful inducement for all the muscles of the thigh to preserve the limb spasmodically in a state perfectly motionless, so that in all these cases the toe is always retained in the position in which it was placed in the first instance—it is inverted or everted, as the case may be. This I believe is one of the reasons of the contrariety of opinions expressed so frequently by surgeons with regard to eversion of the toe, as a diagnostic sign of fracture of the neck of the thigh-bone—and which consequently may be placed in either position by the manipulations of the surgeon, and should be particularly noted during all his investigations.

Fracture of the trochanter major from the shaft of the bone, or a separation at its epiphysis, may occasionally occur. This can alone be the effect of direct force applied to the part. It may, from the amount of injury to the soft parts, be attended with considerable obscurity; but cannot possibly be confounded with fracture of the neck of the thigh-bone. In this case there can be no shortening of the limb or impediment to the movement of the joint; except it be from the pain and swelling of the soft parts, for the coxo-femoral articulation is still perfect. On placing the hand upon the hip-joint, we find that the trochanter major is elevated above its normal position; being drawn up by the action of the glutei muscles, it is evidently moveable independent of the shaft of the bone. By pressure from above, and powerful abduction of the limb, we may be very likely to bring the separated extremities together. In case of fracture, we shall in all probability observe a crepitus; but in case of diastasis, this may not be experienced, as the friction would in all probability be between the surfaces of the soft cartilage. The evident want of continuity in the parts connecting the trochanter major with the shaft of the bone, which is particularly marked upon adduction of the thigh, will commonly prove a distinct indication of the nature of this accident.