

wide laceration of muscle, rupture or displacement of tendons, or such pre-existent conditions as tubercule, gout or hæmophilia.

The treatment of recent fractures by massage was so fully discussed at the meeting last year at Ipswich that it is needless to consider it now. The after treatment of dislocation has of late years undergone a great and very advantageous change. In the case, *e. g.*, of the shoulder, the arm is no longer bandaged to the side for a fortnight or three weeks, but passive movements and massage are regularly used after the second or third day. I have seen a patient thus treated able to move his arm freely in every direction in the course of three weeks. I have also seen a patient walk freely and without lameness three weeks after the reduction of a dislocation of the hip. The chief symptoms which indicate the use of massage and movements are stiffness and pain; but before they are employed the cause of the symptoms must be ascertained, as to whether the mischief is inside or around the joints. Take the shoulder. The arm may be stiff and there may be severe pain and marked muscular wasting. Is this a case of disease of the joint itself or of adhesions outside? There is, I believe, only one test to be relied on to determine this question. This is to ascertain whether the joint is as stiff as it at first sight appears to be, or whether, within certain limits, movements are free and smooth. If these free and smooth movements—limited though they be—are present, the fact is a strong indication that the joint is sound, and that the symptoms depends on surrounding adhesions. Cases in illustration are related. As to pain it is very important to remember that it cannot be used to differentiate between real joint disease and surrounding adhesions. Indeed, in many cases the relaxed pain due to adhesion is more severe than that produced by joint disease. Muscular wasting—a principal symptom in disease of a joint—may be present, though the case is one of mere adhesion in the capsule and surrounding parts. In some instances movement under an anæsthetic will produce a cure which there seemed at first sight no reason to anticipate, for though the patient complains of “weakness” and pain in the joint there is no appreciable stiffness or any condition for which movement and massage seem called for. These cases, which bone-setters not rarely cure, by moving them as they move all others, are instances of slight adhesions which cannot be detected, but which are yet sufficient to make the patient walk with lame-