

steam under pressure and preserved for use either dry or in an alcoholic solution of bichloride of mercury. The threads have a smooth surface, never tangle, cannot absorb secretions, and are easily tied. Pagenstecher uses these celluloid threads to the exclusion of silk, and the use of catgut for ligatures has been greatly reduced. The results have been good and the saving considerable.—*Buffalo Medical Journal*.

THE DIAGNOSIS OF JOINT TUBERCULOSIS.

The writer found that nearly 31 per cent. of all joint diseases applying at a dispensary for special orthopedic diseases were cases of joint tuberculosis.

One of the most important things in the successful treatment of tuberculosis of joints is an early diagnosis.

That heredity plays in many an important part is true. Frequently children are affected by a tuberculous disease of the joint from a tuberculous father, the mother apparently in good health or having slight anæmia. Rheumatism of the joint, particularly in young children, is the most frequent condition with which this disease is confused. Rheumatism of a single joint is an exceedingly rare disease, especially in children. Most of such cases when followed carefully are found later in the hands of specialists being treated as tuberculous. The symptoms upon which the diagnosis mostly depends in joint tuberculosis are spasms and atrophy. The spasm of the muscles is tetanic in character, and occurs very early in disease. This is followed soon by wasting of the muscles; no matter what joint is affected with tuberculosis, these two symptoms are always present. In the spine, particularly in the lumbar region, it is one of the earliest symptoms, often before the occurrence of deformity, spasm of the psoas and iliacus may be detected. In hip disease the adductors are among the first, and in the knee joint the ham string tendons are frequently contracted at a very early stage. The use of Roentgen ray is of use only in advanced tuberculosis. The appearance of the cartilages and bones being irregular and roughened very differently from the clear and distinct outline of photographs in cases of chronic synovitis. In specific arthritis, by means of the X-ray, the deposits of fibrous tissue may sometimes be detected. These will obscure the normal outline of the joint, but there will not be the roughened, irregular and worm-eaten appearance of tuberculous disease. A picture should also be taken of the sound joint on the opposite side in the same position as the