

NEW YORK ACADEMY OF MEDICINE.

SECTION IN ORTHOPEDIC SURGERY, MEETING OF APRIL 16TH, 1897.

The Non-cutting or Unbloody Operation of Lorenz for the Reposition of Congenital Dislocation of the Hip.

This paper, by Dr. G. R. ELLIOTT, was chiefly a description of the different steps of the procedure, viz. : 1. The reduction, or bringing the head to the level of the acetabulum. 2. Re-position, or wedging the head into the acetabulum. 3. The formation of a solid acetabulum by manipulation and allowing the child to walk about with the thigh fixed by plaster of Paris at about ninety degrees of abduction. The three steps of the operation were performed under chloroform on a patient, a boy twenty-two months old, by Dr. Elliott before the members of the Section.

Dr. T. H. MYERS reported the successful performance on a similar patient, three and a half years old, of Paci's method of manipulation. viz. : forced extension, flexion and then strong traction downward. There were telescoping, lordosis and all the other signs of dislocation, and one-half inch of shortening. A good deal of force was used in order to cause inflammatory adhesion. The limb was immobilised at thirty degrees of abduction, the spica was changed several times in the following six months and the girl was then allowed to go about with a walking brace and a high shoe on the sound side. She walked with a splint walk when the apparatus was removed. The limbs remain at a nearly equal length.

Dr. W. R. TOWNSEND said it would be a great advance if these cases could be cured without a cutting operation. In his experience and observation open methods had proved unsatisfactory. The patients continue to walk lame and dislocation is liable to recur. He thought the superiority of the new methods could not be taken for granted at once. He had treated one patient by the Paci method.

Dr. R. H. SAYRE had seen but one patient in whom the hip could be distinctly reduced by Bigelow's manipulation, but he had not been allowed to operate. In this case it was necessary to abduct the limb much more than had been done in the patient treated this evening. He had not achieved brilliant success by operating. In one case after the child had been walking for six months an abscess developed in or near the joint.

Dr. R. WHITMAN had operated four times by Lorenz's method and