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CERTAIN FORMS OF CLUB FOOT.

By WM. H. HINGSTON, M.D., L.R.C.S. EDIN., Surgeon to Hotel Dieu Hospital.

Professor of Clinical Surgery Montreal School of Medicine. (Read before the Medico Chirurgical Society, January 25.)

It is precisely one hundred years since, as Adams says, the treatment of club foot was limited to mechanical appliances, when Thilenius proposed the division of the tendo-achillis by an open wound; sixty-eight years since the division of the same tendon subcutaneously was performed—if Delpech's operation deserves to be so designated; and fifty-three years since Stromeyer improved upon the operation of Delpech by puncture and subcutaneous division. The modification of the operation of Thilenius, so far, concerned the manner of dealing with the tendoachillis, for to that tendon alone was imputed all the blame of the deformity; until comparatively recently, when other structures,—tendinous, muscular, ligamentous, bony, have received attention.

I intend here to speak only of that inveterate form of club foot; not of that simple form with which all are familiar, and which the nurse's and, later, the mother's hand alone may remedy; nor of that other form which mechanical appliances may easily correct; nor of the milder form which tenotomy alone will cure; nor of a still severer form in which tenotomy of certain tendons, aided by mechanical appliances, suffice to remedy; but of that still severer form in which division of all the tendons and fascia commonly, or exceptionally at fault, followed by the use of the best

mechanical contrivances, are powerless to remedy. One such case I exhibited to you last year, in the person of Emelie Boileau, aged 15 years, upon whom I had operated in the early part of 1881 for exaggerated talipes equino varus.

It may be in the recollection of some of you, that, when I showed to this Society the young girl in question upon whom I had performed the operation which had been introduced to the profession by Dr. Phelps, of Chateauguay, N.Y., based on the principle enunciated by Dr. Post of New York in dealing with wry neck, I mentioned that I had already, with the tenotome, divided, without much amelioration of the deformity, all the muscles usually at fault in this affection. There remained, to undo the excessive arch and shortening and doubling-in of the foot, excision of a portion of the tarsal bones; but the additional shortening of the foot that would result, not to speak of the considerable risk to limb and life of opening into the inter-tarsal articulations, made me disinclined to resort to it. You saw the result of the operation in a completely straightened foot, without any diminution, but with increase of its length, and with but temporary impairment of its strength. The operation, so far as the members of this Society knew, was a novel one, and one not without the apparent qualification of rashness.

I shall give short notes of a second, third and fourth, and two photographs of the last.

J. McG., æt. 19 years, the subject of exaggerated talipes equino varus entered the Hotel Dieu on 12th February, 1883.

He had been born with the deformity, but, as years rolled on, the deformity became greater.