

The Canada Medical Record.

VOL. XXII.

MONTREAL, DECEMBER, 1893.

No. 3

CONTENTS.

ORIGINAL COMMUNICATIONS.

Ununited Fracture.....	49
The Prophylaxis and Treatment of Puerperal Eclampsia.....	53

SOCIETY PROCEEDINGS.

Abstract of the Proceedings of the Third Annual Meeting of the American Electro-Therapeutic Association—(Continued).....	57
The Nutritional Effects of Static Electricity Considered in Relation to High Frequency and High Potential Currents, and the Transparency of the Dielectric.....	57
Electro-Medical Eccentricities.....	58
The Action of the Continuous Current within Living Tissues as Distinguished from the local Polar Action.....	59
Observations on the Treatment of Goitre.....	59
Case of Ascites Cured by Galvanism.	60
Metallie Electrolysis.....	60
Some Observations on the Fine Wire Coil or Current of Tension.....	62
The Influence of Frequency of Inter-	

ruptions and Character of Induced Current Waves upon the Physiological Effect.....	62
Induction Coils.....	62
Remarks upon Apparatus to produce Induction Currents and the Character of the Waves of Individual Apparatus, with especial reference to those applicable to Medical Uses.....	
The Graphic Study of Electrical Currents in Relation to Therapeutics.	63
In Medical Induction Coils, how does the Current of the Primary differ from that of the Secondary; and what Influence has this difference upon the respective Physiological Effects.....	63
A Study of Electrical-Anesthesia and Frequency of Induction Vibration.....	64
On the Influence of Frequency and the Graphic Curve on the Results of Gynaecological Electro-Therapeutics, particularly with the Sinusoidal Current.....	64
The Alternating Current in Electro-Therapeutics.....	64
The Treatment of Dysmenorrhœa by the Galvanic Current.....	65

The Treatment of Subinvolution by Electricity.....	66
A New Intra-Uterine Electrode.....	66
A Contribution to Electro-Therapeutics in Salpingitis.....	67
What are the Possibilities of Electricity in the Treatment of Fibroid Growths.....	67
Improvements in Electro-Static or Influence Machines.....	68
Faradization as it was and as it is with the Controllable and Recordable Current, as provided by a New Apparatus.....	69

EDITORIAL.

The Causes of Rheumatism.....	70
Imperial Honors for the Canadian Medical Profession.....	71
Thyroid Glands as Medicine.....	72

BOOK NOTICES.

Le Médecin de la Famille.....	72
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Original Communications.

UNUNITED FRACTURE.

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It is with much hesitation I appear before such an august and critical assemblage of surgeons as are gathered here, for I feel nothing I may say will appear new to the majority of you.

The subject—Ununited Fracture, Delayed Union, Pseudarthrosis—has received attention at the hands of writers on Surgery from the earliest time, and engaged the attention of the best and ablest surgeons. To follow its literature would be an almost endless task, and to

review, in detail, the various methods of treatment would occupy much more time than I desire to consume. According to writers on Surgery, firm union between the fractured ends of a bone may sometimes be delayed beyond five or six weeks, the period of time usually required for their repair. This condition constitutes what is termed non-union, ununited fracture or pseudarthrosis. This delayed firm union may be temporary or permanent, it may correct itself or it may require the intervention of the surgeon. The character of the union in these cases is of a fibrous or ligamentous nature, or is a proliferation of brittle callus.

The causes of this non-union are divided into two classes,—those of a constitutional character and those of a local character. Among the constitutional are hæmorrhage, scorbutus, diarrhœal diseases, excessive lactation, pregnancy, shock, any state of the system attended by a diminution of the vitality of the patient. The reparative

*Read at the Section of Surgery, First Pan-American Medical Congress, Washington, D.C., September, 1893.