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TREATMENT OF HIP DISEASE.

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The importance of correct principles of treatment of this disease may be inferred from two sources: (1) its frequency; (2) the unsatisfactory results that come so often to our notice. Mr. Bryant thinks that 33 per cent. of the total number of joint diseases are cases of *morbus coxæ*. The Clinical Society of London, in 1881, reported 45 cases treated by excision, of which 35.5 per cent. died from causes connected with the disease, and 15.5 per cent. died from the results of operation; 260 cases with suppuration treated without excision, of which 30.4 per cent. died from causes connected with the disease; and 124 cases without suppuration treated without excision, of which 10.5 per cent. died. Of 954 general cases (medical and surgical) admitted to the Hospital for Sick Children, Toronto, 154, or more than 16 per cent. of all the cases, were hip disease.

This disease is pre-eminently one of childhood. Of 1344 cases collected by Dr. G. A. Wright, of the Manchester Royal Infirmary, more than 1,000, or 75 per cent. of the cases, were under fifteen years of age. Of 979 cases reported, 55 per cent. were under ten years of age.

Without entering into the question of pathology, or of diagnosis, it may be stated that the disease referred to in this paper is that which attacks one or both of the bones which enter into the formation of the joint, and tends to go on to its destruction.

ILLUSTRATIVE CASES PRESENTED.

Case 1. July 9th, 1889. W. S., male, æt. 4 years. First noticed lame in August, 1887. Was kept in bed for several months. First abscess formed in March, 1888. The child is pale, but appears fairly nourished. Cannot walk, but shuffles along the floor in a squatting position. Leg is flexed on the abdomen at an angle of 90°, and in marked adduction. The leg is kept in this position, the child not permitting motion of any kind at the joint. Joint tenderness was very great. There are several sinuses about the outer and anterior aspects of the thigh discharging pus, and there is a collection of pus not yet opened at the junction of the thigh with the perineum. Family history, negative; no history of injury.

July 20. A Thomas posterior hip splint applied, the leg being secured at an angle of 140° with the axis of the body. Ordered cod liver oil.

July 27. Splint readjusted and leg placed at an angle of 160°, without as much objection on the boy's part as was made to its first application. The boy creeps about on left knee, without hurting the diseased joint. Sleeps at night without waking and crying as formerly.