

much to the anatomy as it is usually supposed the disease begins in the ligamentum teres.

The hip-joint is the most important one in the human frame, and anything abnormal with it affects locomotion at once. It is liable to a variety of diseases, such as affect joints generally. By its means the strongest limb in the body is attached to the trunk itself, and from its shape and formation, the various affections to which it is subject are very often detected with difficulty, requiring great caution and sound judgment, based upon previous experience, before coming to a definite diagnosis. A correct diagnosis of this affection at the beginning is of the utmost importance, as upon it depends whether the disease is to be arrested in the early stage or allowed to go on producing mischief.

Upon no other disease has there been more written and more controversy than upon the pathology of morbus coxarius. Some authors, such as Boyer, Aston Key, and Bauer, affirm that it, of necessity, begins in the ligamentum teres; the latter admits that periostitis may occasionally be a cause; others again, as Barwell, say that it originates either in the cancellated structure of the femur and acetabulum, or in the synovial membrane. Miller gave it, as his opinion, that an ositic change takes place in the cancellated tissue of the acetabulum and of the head of the femur, and that after a time a chronic inflammatory process set up.

Sir B. Brodie thought that the disease began in the articular cartilage. Holmes Coote, that the cancellous structure of the head of the bone was first affected, and afterwards the synovial membrane and ligamentum teres. From this labyrinth of opinions it would be hard indeed to come to any definite decision, but judging from pathological specimens I have seen in this city and the different museums in London, England, and also from the progress of the malady, I believe the disease may and does commence in any of these structures. Specimens have been shewn where the ligamentum teres was destroyed at a time when the remaining structures of the joint had only suffered moderately. Tricke mentions one case where he found the muscles, vessels and capsule of the joint sound, but in the cancellous tissue a firm, hard, yellowish-white mass, and that the cancellous tissue was somewhat redder than natural; so, also, other specimens have been collected where the cancellous structure and the ligamentum teres have been injured and the rest of the joint remained comparatively sound. Holmes Coote confesses that, wherever he had opportunities of examining cases recently affected, he almost always found the liga-

mentum teres altered. Bush says, whenever he had an opportunity of inspecting the joints in an early stage—and that was seldom—he found the cavity filled with yellow pus, seldom dry, the fatty tissue in the bottom of the acetabulum hyperæmic and swollen—the synovial membrane rough and thickened—cartilage the same, and sometimes solution of continuity.

The most frequent cause of hip-joint disease, as well as of other joints, is stated by most writers of surgery to be scrofulosis, implying thereby, that it is the symptom merely, or the result of the constitutional diathesis. There are some who deny this, saying that scrofulosis does not rest upon any permanent pathological basis, and that we are left to draw upon our imagination a good deal to recognize its chemical and microscopical characters. They say, and not without reason, that if scrofula did exist and was always the cause of this affection, a person would be liable to joint diseases at any time of life. Facts, however, shew differently. In infancy, that is, before three years, and in old age, the disease is extremely rare. Statistics tell us that joint diseases are most common at the period from six to ten years. They also advance two other strong assertions in their favor, viz.: rich and poor, town and country, are all equally attacked; also that constitutional treatment alone has proved of little benefit in joint diseases, while manifest results follow judicious local treatment. I have seen upwards of two hundred cases of joint diseases, a good proportion of them being hip affections, and in very few of them was it found impossible to trace them to a traumatic cause.

Between the ages of six and ten years, the boy or girl is very active and heedless, consequently, continually meeting with accidents, but after that age, accidents are avoided, and then we see joint diseases decrease. Boys, also, are more subject to the disease than girls, and those children that are neglected by their parents. In the list of cases I have collected, the child attacked has always been one of the most active of the family—the mischief maker,—always in trouble, either tumbling down stairs, or off some high place where his energy, courage or imprudence had led him.

It is not to be denied that articular affections may arise from a strumous diathesis, and then we find very frequently more than one joint affected, as in a boy, aged 12, admitted into the Montreal General Hospital, under the care of Dr. Reddy, July, 1868, with morbus coxarius of the right hip, and synovitis of the left knee where the patella sloughed