

head, and its destruction during the epiphysal period as tantamount to the destruction of the head itself. From the composition of the round ligament a high degree of susceptibility must be inferred. In fact, none of the articular components can bear any comparison to it in this respect. Besides the ligamentum teres is subject to contusion from violence to the great trochanter, whilst the thigh is in the position of adduction and eversion. And upon the trochanter falls are generally received. Boyer has already expressed the belief that morbus coxarius emanates from the round ligament; but for want of pathological facts, he did not succeed in convincing his contemporaries. The serofulous theory very soon preponderating overawed his views, which well deserved consideration. Perhaps no articulation has suffered more from the dogmatism of the humoralist school than the hip joint; and the fiction culminated into a system in morbus coxarius. There were explanations in it for every single symptom. Very few of these are destined to survive the present century.

It cannot be denied that morbus coxarius may possibly be caused by primary synovitis or periostitis with subsequent centripetal perforations. But the majority of cases must necessarily result from primary disintegration of the round ligament. Among the reasons for this opinion, of which I have already enumerated a few, stands in the boldest relief the pathological fact that the round ligament is invariably destroyed at a time when the remaining components of the joint have suffered but moderate disintegration. Next comes the striking fact that the head of the femur is invariably reduced excentrically in size, and in a few exceptional instances thrown off in toto. That the origination and frequency of morbus coxarius in childhood has the closest connection with the epiphysal construction admits of no doubt in my mind; and it explains satisfactorily the comparative rarity of this affection during adult life, when the epiphysis is completely united with the shaft, its nutrition thereby perfected, and the liability to accident lessened.

Gentlemen, I shall here close my discourse on the pathology of joint diseases, and not inflict upon you a reiteration of all that is said better in the works of Sir Benjamin Brodie, Robitansky, Paget, Gurlt, and other distinguished pathologists. Moreover, the practical benefit of being thoroughly versed in the ulterior structural changes attending joint diseases, is indeed of questionable value. If you see one joint in the last stage of its malady, you have seen them all, so little difference between them is presented. My chief object has been to acquaint you with the initiatory changes of joint diseases, and thus lead you in a practical direction for the prevention of their destructive advancement.