

Fracture of malleoli, either the inner or outer may break ; the commonest form, Pott's fracture of fibula and inner malleolus. Fractures above malleoli often comminuted, may need resection if compound, 3—6 months, II.

Fracture at tibio-fibular ligament may occur with sprain; in neglected cases, often leave flat foot.

Fracture of astragalus from falling or jumping often complicated with fractured malleoli and leaving club foot deformity ; may leave severe results, especially ankylosis ; X ray diagnosis important in all injuries of ankle.

FOOT AND TOES : *Wounds :* neglected, dangerous from sepsis and phlegmon ; scars on soles, bad and may need operation ; special liability to tetanus ; infection may follow trivial wounds.

Contusions : 4—12 ; walking painful ; badly fitting shoes aggravate the condition ; bed and warm applications necessary.

Sprains : in cases of flat foot, very serious ; may take years to heal.

Lacerations : with rupture of tendon and fascia ; the plantar fascia may be tender for months.

Fracture : of os calcis, pain in standing and walking may persist from 2—4 years ; of metatarsal, often interferes with function ; pain after removal of bandages may last for months causing limping and limited use of foot.

Rules for assessing injuries of lower extremity.

(1) Certain occupations especially require steady footing ; if climbing and good balancing necessary, motion must be free.

(2) In other occupations much walking is needed.

(3) In others, prolonged standing. For all these, good restoration of function needed, not merely cure of the injury. It should be noted whether the person can acquire a sedentary occupation and do his work sitting, or if he can only do light indoor work. The p.p.d. in lower extremity is 40—75 per cent. after serious injuries. The actual motion of the joint is to be accurately noted.

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