

Contusions: with bloody effusions, 4-8, B.; on knee cap, bleeding into bursa.

Sprains: slight, 1-2; severe, 4-12, B.; (relapsing synovitis with effusion; uncertain gait; fatigue and tendency to fresh sprain; may cause fixation; stiffness in joint with exostoses, p.p.d.; muscle atrophy; rupture of internal lateral ligament, 5-10, B., and apparatus, 1-2 years.

Dislocations: from severe violence; good results if seen early; 2-4 months, H.; anterior and posterior dislocations often complicated by injury to vessels.

PATELLA: *Dislocation*: 3-12, B.; readily healed if replaced but liable to recur; if unreduced, motion is impaired.

SEMITARSAL CARTILAGES: *Rupture*: impaired motion requiring operation; floating cartilage.

KNEE JOINT: *Fracture through*: 8-12, B.; if comminuted, 8-16; if transverse; (fibrous union; with stiffness, mechanical treatment, 1-2 years; weakness of quadriceps); fracture through condyles, 8-10; fracture through upper end of tibia, 12-24; (stiffness often results).

LEG: *Wounds; contusions; abrasions*: periostitis often diagnosed when merely bandaging bad; varicose veins, special care necessary; also if scars or ulcers are injured; varicosity aggravated by accident and may lead to ulcer; to be compensated if the direct result of accident; *thrombosis* common, apart from varices; pain felt in leg with swelling following; patient may work one or two weeks with increasing pain before disabled; if the accident can be proved, thrombosis may be regarded as due to it even if work is continued during interval.

Laceration: of muscles and sinews in calf, often tendo achilles; 8-12; suture.

Fracture: shaft; usually of both bones; 4-6 months; (stiffness of joints from disuse, massage beneficial; malposition often leaves an angle; pain from pressure on nerves; eversion of foot, osteotomy; X ray diagnosis important, callus at first transparent; may have delayed union and false joint; if treated by plaster splint or allowed to walk with apparatus, operation rarely necessary; swelling of foot and ankle from interference with vessels or thrombosis relieved by massage to restore muscular tone, or by passive motion of joint; thrombosis likely in advanced age; compound fractures, 4-8 months, H.; often leave necrosis of bone, fistule or ulcers).

ANKLE: *Sprain*: usually from falling or jumping; best results from massage; 2-6; (swelling and radiating pain; uncertain gait and tendency to sprains; stiffness, if kept at rest during the cure; good results by massage and mechanical treatment; persons with varicose veins suffer most).

Dislocation: anterior or posterior; 8-12, B.; less disability from badly healed anterior than posterior; calcaneus position than equinus; operation with good result; subastragoloid, prognosis good; in neglected cases, only hope of improvement is operation; dislocation with fracture of astragalus, good if replaced, otherwise pain persists.

Fractures: through malleolus of fibula; 2-4 months; position of foot most important; danger of subsequent stiffness.

Fractures compounded from injury by bone fragments; (pressure necrosis; swollen foot and leg; thrombosis; embolism; and stiff joint, permanent if from callus, often in equinus position; *flat foot* if fibular fracture set without correction of position; prevents climbing and standing long, never perfectly healed benefited by plate).