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of continuity of either the tendon, the patella or the ligament. The force that indirectly produces the solution of continuity is obviously exerted equally on the quadriceps tendon, on the ligamentum patellæ, on the tuberosity of the tibia and on the patella; but fracture of the patella is by far the most common result of such indirect violence.

Traumatic or pathological, open or subcutaneous ruptures of quadriceps extensor femoris tendon or of the ligamentum patellæ may, like fractures of the patella, be simple or complicated, be complete or incomplete, be unilateral or bilateral. They may be associated with, precede, or follow a fracture of the patella.

The following table shows the symptomatic resemblance existing between these three conditions:—

Complete Rupture of Quadriceps Extensor Femoris Tendon.	Complete Rupture of the Ligamentum Patella.	Complete Transverse Fracture of the Patella.
1—May be bilateral.	ıı	"
2—More common in males.	"	"
3—May be due to direct, to indirect violence, to muscular action, or to a combination of two or of all of these different forms of violence. It is frequently stated that the disabling lesion occurred during an effort on the part of the individual to avoid a fall (9). Quenu says that in the great majority of cases, rupture occurs during a contraction of the quadriceps extensor initiated to avoid flexion of leg on thigh.		
4—Inability to extend leg on thigh. Patient is unable to elevate heel from sur- face of bed.	"	"
5—Distinct sulcus can be felt between the margins of proximal and distal portions of the divided tendon.	felt between the magins of the proximal and dis-	can be felt between fragments of the