

# CANADA

# MEDICAL JOURNAL.

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## ORIGINAL COMMUNICATIONS.

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*Lectures on the Pathology and Treatment of Joint Diseases.* By LOUIS BAUER, M.D., M.R.C.S., Eng., &c.

### III.

#### CLINICAL CHARACTER OF JOINT DISEASES.

All joint diseases have some symptoms in common. Of these pain is the most prominent; usually the first to appear, and the last to disappear. Clinical observation discerns two kinds of pain—one emanating directly from the diseased structure; the other proceeding in a circuitous manner from the spinal cord, and manifesting itself in parts not directly connected with the affected articulation.

The former is known by the term of *structural* or *inflammatory pain*; the latter as *reflex*. The structural pain varies in extent, intensity, and duration, according to the tissues implicated, and to the nature and extent of the malady. In some instances the pain may occupy but a small and circumscribed place; in others it may be diffused over the entire articulation, and extend even beyond it.

Its intensity may vary from the sensation of heat and soreness, to the degree of burning, lancinating and pulsating; and be equally variable in its continuance.

The morbid condition of the affected structures does not always furnish a satisfactory explanation of the degree of pain; but too often one is out of keeping with the other. Thus, for instance, a mere ephemeral rheumatic synovitis, and in hysteric affections, the pain, for the time being, is very intense and largely diffused, whereas, in hydrarthrosis but little inconvenience to the patient arises from a similar source. The general affection of an entire articulation, with advanced disintegration of the various tissues, may exist for months, and yet be attended with comparatively little suffering, whilst on the other hand, affections apparently trifling, may create a storm of symptoms and intense agony.