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Lectures on the Pathology and Treatment of Joint Diseases. By LOUIS
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VI.

TREATMENT OF THE SEQUELÆ OF JOINT DISEASES—*Continued.*

If we consider the small proportion of accidents connected with brisement forcé, and the large number of operations I have successfully performed, they scarcely command our notice. But even this insignificant number of accidents may be reduced by still greater precaution, and during the last two years I have successfully avoided them entirely, and hope to do so for the future. Whenever I have reason to suspect infirm-epiphyseal connections, I do not attempt to break up at once the intra-articular impediments, but do so in three or four different times and secure each time the gain by appropriate mechanical appliances. The safest way however to break up adhesions of this description is by extension and not by flexion, as I have before advised. The latter is more efficacious but more dangerous in producing diastasis.

In protracted cases of false ankylosis, we are likewise necessitated to repeat the forcible extension several times before succeeding in giving the extremity the full benefit of a straight position, and we may succeed at a third or fourth repetition when the first attempt proved very inauspicious. This is especially the case when peri-articular scar-tissue complicates the mechanical difficulty.

After the brisement forcé has been performed, the extremity should be firmly surrounded by a well applied flannel bandage, with ascending tours, from the periphery towards the interested joint, and the latter with tightly applied strips of adhesive plaster spread on Canton flannel, over which the flannel bandage is continued to the body.