

the organising blood-clot give way, hæmorrhage takes place, and the process of organization is apt to be arrested. Massage and passive movement should be kept up from an early period after the operation.

Tuberculous osteomyelitis is a condition in which the medullary tissue of the bone becomes infiltrated with tuberculous material. This condition especially affects the shorter long bones such as the phalanges and the metacarpals. In the fingers it is known as "Strumous dactylitis." It is also the most common form of tuberculosis in the small cancellous bones such as the tarsals.

The symptoms are very characteristic. The patient is almost always a child; very often several bones are affected and the enlargement of the bone is of a spindle-shaped character. In the early stage there is no softening or pain and later on the presence of an abscess adds to the certainty of diagnosis. In this case the only difficulty will arise in connection with hereditary syphilis, because in syphilis, one meets with a somewhat similar condition. There, however, the condition arises usually in infancy, other symptoms of syphilis are present, and abscess formation does not occur. In the case of tuberculous osteomyelitis of cancellous bone, such as the tarsal bones, beyond the feeling of uneasiness and aching in the early stages the patient does not usually notice anything till the disease has attacked the neighboring joints.

The treatment of tuberculous osteomyelitis is:—

Careful rest and pressure, and good hygienic conditions should be persevered in for a very considerable time. Operation is hardly necessary in these cases unless there are signs of abscess formation outside the bone. The operation consists in clearing out the disease and thorough disinfection of the cavity by sponging out with undiluted carbolic acid. The wound may then be stitched up without drainage. If, however, there is much oozing it is well to introduce at one angle of the wound for two or three days either a small drainage tube or a few strands of horse-hair or catgut so as to allow the blood to escape. It is well to place the part in a splint.

In the case of tuberculous osteomyelitis of the small cancellous bones, such as tarsals, the best result is obtained by excising the affected bone completely. As a rule if only one bone is taken away, the result is extremely satisfactory as regards the usefulness of the foot. In after years, in the case of the cuneiforms more especially, one is often unable to tell that anything had been removed from the foot.

BIBLIOGRAPHY:

- "International Text-book of Surgery."
- "American Text-book of Surgery."
- Cyclopædia of Practical Medicine.
- "Walsham."