

Enlargement of the Knee-joint—Amputation.

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the probable influence of lunar changes on the production of epileptic fits, M. Leuret concludes that the moon exerts no obvious influence on epileptics; or, if any conclusion be drawn, it may be that the new moon, contrary to the popular notion, exercises a salutary influence, fits being then rather less frequent than at other periods.

The electric state of the atmosphere is not without its influence on epileptics. Stormy weather predisposes to attacks, but the most powerful predisponent is certainly intemperance, and many patients have owed their recovery to an abandonment of previous intemperate habits. "Erotic impulses about the time of a fit are, in certain cases, altogether immoderate, and the patients, while destitute of consciousness, and only capable of instinctive actions, sometimes abandon themselves, without control, to the act of masturbation. Si, par des liens, si, à l'aide de la camisole, on leur tient les mains éloignées du corps, ils exécutent des mouvemens du bassin, et tiennent en même temps des propos qui rendent manifestes, je ne dois pas dire les désirs, mais les besoins impérieux auxquels ils sont en proie. The deed is, in reality, at this time neither a passion or a vice—it is an organic action dependent on epilepsy. J'ai vu de jeunes garçons, sages, du moins en apparence, dociles, d'une réserve parfait, qui, dans l'intervalle d'attaques rapprochées, étaient pris d'un délire érotique qu'ils exprimaient et par leurs discours et par les mouvemens de leur corps. On ne pouvait pas s'approcher d'eux, leur tâter le pouls, leur toucher le front, sans que ce simple contact ne fut recu par eux comme une caresse."—*London Lancet.*

AMPUTATION ON ACCOUNT OF ENLARGEMENT OF THE KNEE-JOINT.

By G. Volney Dorsey, M.D., of Piqua, O.

ADAM BEAMER, the subject of the present operation, was brought to this place in June, 1840, from the county of Van Wert. His age was about twenty-two years. The history, given of his case at the time, was, that about one year previously, he was affected with severe pain in the right knee, of which no very obvious cause could be assigned, though he was inclined to attribute it to an injury received in leaping. He was treated by some physicians in that section of the State, by blistering, cupping, &c., but without any relief. About three months before I saw him, his knee began to swell, and increased very rapidly, so that, at the period of my examination, its circumference, immediately about the joint, was thirty-seven inches, declining gradually on each side, and extending about half way to the hip-joint above, and to the ankle below. Beyond these points, there seemed to be but little disease, though the limb was enlarged to almost double the size of its fellow. The swelling was hard, and not painful to the touch; the veins, ramifying on the external surface, immensely enlarged; the great weight and pressure had caused some ulceration on the inferior parts of the tumor, augmented probably by the heat of the weather, and by travelling many miles over very rough roads, on a bed imper-

fectly suspended in a small wagon. His constitutional symptoms were, extreme debility, hectic fever, cough and copious expectoration, diarrhœa, and enaciation to such an extent that the tumor and limb removed, would doubtless have weighed one third or more of his whole body. As the swelling was rapidly progressing, and the constitution sinking, it was determined at once to amputate, as the only possible means of saving life. I accordingly proceeded to operate, in the presence of all the physicians and a number of the citizens of the town. It being necessary to cut as high up as possible, from fear of disease of the bone, the tourniquet could not be used, but the artery was compressed in the groin by an able assistant. Contrary to the usual opinion in regard to the upper third of the thigh, I performed according to the flap method, plunging the knife directly through the thigh from above downward on the outside of the bone, and cutting out a flap of half the diameter of the stump; then entering and bringing out the knife at precisely the same points on the inside of the bone, another flap was made, the parts retracted and the bone sawed, all which was done in less than one minute. Two arteries and the femoral vein were secured, the flaps brought together by adhesive plaster and dressed with basilicon; less than a pint of blood was lost, which was fortunate for my debilitated patient. The femoral vein was unusually small; the medulla of the bone appeared slightly dark. No bad symptoms supervened, but on the contrary all the unfavorable constitutional symptoms disappeared at once, with the exception of the diarrhœa which was troublesome for a few days, and the patient declared he slept better the night succeeding the operation than he had done for months. In two weeks the wound was half healed: the last ligature came away on the 30th day.

This case is interesting from the immense size of the tumor, being, I believe, among the very largest that have ever been amputated with success, and also because it gives evidence of the great recuperative powers of the system, which often rallies when reduced to the lowest ebb, provided the cause of disease can be removed.

One word on the subject of the flap operation, now, I believe, fortunately for humanity, becoming tolerably general. I have used it in amputation in various situations above and below the knee, and on the arm, and always with the most satisfactory results. It is infinitely more speedy than the circular method, and consequently produces less suffering; but the great advantage is, that by any common care, all possibility of protrusion of the bone, with all its dreadful consequences, is avoided with perfect certainty.

This tumor, when examined after amputation, presented the appearance of a fungous growth, originating from the medulla of the lower third of the os femoris, and arising to the height of about twelve inches, carrying the flesh and muscles, which seemed tolerably sound, before it. The patella and the head of the tibia were enlarged and disposed to soften—all the ligaments of the joint much diseased and distended by the fluid which occupied its cavity, to the amount of at least a quart—no pus

was discernible—the fungous growth was of a yellow color, and hard gristly consistence, springing directly from the medulla, destroying the upper half of the circumference of the bone, and branching widely upwards and on both sides.

This patient recovered entirely from the operation, but died, as I have understood, about eighteen months afterwards from an attack of bilious fever.—*Western Lancet*.

OBSERVATIONS ON THE TREATMENT OF SPRAINS.

By J. V. Prather, M.D., of St. Louis.

SPRAINS are usually considered injuries of little gravity, and treated accordingly. In general, it is true, but not to the extent which is generally believed; for every observing surgeon knows that many grave diseases can be traced to these injuries, such as a permanent debility or lesion, which predisposes to a return of the same accident from very slight causes; scrofulous diseases, in persons of that peculiar temperament which is favorable to their generation; acute and chronic inflammation, suppuration, and even caries of the bones of the articulation. The liability of such serious consequences from sprains, one would suppose, ought to have engaged the attention of surgeons more than it has, but the little success which has attended their prescriptions in many cases, it would seem, has paralyzed their energies, and caused them to leave their treatment in most cases to old women and quacks. These facts have induced me to make a few observations on them, and particularly on their treatment.

A sprain, or strain, signifies a violent stretching or extending of the tendinous or ligamentous tissues of an articulation, with or without rupture of their fibres. It is asserted by some distinguished surgeons, that sprains cannot take place in the orbicular articulations, and are confined to the ginglymoid. This is a mistake; every articulation in the system is subject to them; for a violent abduction of the thigh and a strong movement of the arm backwards, when it is abducted and horizontal, will strain the ligaments of the coxo-femoral and the scapulo-humeral articulations, which we know by the usual signs. Symptoms—pain, usually intense, at the affected articulation, often accompanied with faintness; no deformity or manifest alteration in the natural relations of the articular surfaces; mobility of the parts immediately after the accident, followed with difficulty of motion; sudden tumefaction and generally ecchymoses of the surrounding surfaces.

The diagnosis is easy, if a proper attention and a moderate exercise of common sense is brought to bear, although sprains have been mistaken for luxations, and the efforts to reduce them have occasionally inflicted severe pain and injury. It is unnecessary to enumerate the causes; they are well known.

The usual remedies, as advised by authors, are, perfect rest, warm fomentations, the best of which is hot vinegar applied over brown paper, or