

Case of a congenital disease, or, Malformation of the thigh-bone : illustrating the pathology of interstitial absorption of the cervix femoris / by Dr. Knox.

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CASE

OF A

CONGENITAL DISEASE,

OR

MALFORMATION OF THE THIGH-BONE;

ILLUSTRATING THE PATHOLOGY OF INTERSTITIAL

ABSORPTION OF THE *CERVIX FEMORIS*.

By Dr KNOX, F. R. S. E., Lecturer on Anatomy, Fellow of the Royal College of Surgeons, and Conservator of their Museums.

From the Edinburgh Medico-Chirurgical Transactions.

I WAS requested, about a month ago, to be present at an examination of the body of a child who had died under the care of Mr Moir, of a lingering disease. The child was about two years of age; the complaints which proved fatal were rather of an obscure nature, but were suspected, by all the medical attendants, to be connected with the chest. Dissection proved this; for, on inspecting the body, it was found that an enormous quantity of a scrofulous looking purulent matter had collected in the cavity of the right pleura; the membrane shewed signs of having been extensively inflamed, and the collection of pus had influenced, in the usual way, the

corresponding lung, by forcing it to occupy a much smaller space; and, in a word, to render it comparatively useless to the individual. I found it difficult to ascertain exactly how long the child had been ailing; the parents affirming that the child had been ill for about five or six weeks only; but the medical gentleman in attendance assured me, as indeed was proved on further inquiry, that the child had been in a sickly state for more than six months.

I have said above, that the purulent matter collected in the cavity of the pleura had a scrofulous appearance; but, as I should be sorry to mislead any one in estimating the importance of the alteration in the form of the femur I am about to describe, candour requires of me to state, that there existed no external marks of scrofula in this child; such as enlarged head, swollen glands, or cicatrices of old abscesses, or rickety bones; neither did we find, on dissection, any disease whatever in the abdominal cavity; such as enlarged mesenteric glands, tubercles of the liver, &c. There was, indeed, a slightly tubercular appearance in the corresponding lung, or that which had suffered by the pressure of the collection of purulent fluid; but, with this exception, there existed no other visible marks of a scrofulous predisposition. Lastly, it ought perhaps to be mentioned, that one of the medical gentlemen attending the child considered it as certain that there existed a tendency to scrofula in the family.

Previous to the examination of the body, which led to the preceding remarks, my attention was at-

tracted to a striking difference which existed in the right lower extremity, when compared with the left. It was much weaker generally ; and, more particularly, the muscles of the thigh were weaker and softer than those of the left lower extremity. The whole limb seemed about three-fourths of an inch shorter than the other, and the toes were slightly turned out. When cut into, the hip-joint was perfectly sound in all its parts ; the acetabulum was not changed in form, inflamed, or in any way affected : the head of the femur was also in a perfectly natural state ; but the neck of the bone might be said to have disappeared. The trochanters appeared much longer than usual, and more particularly the larger trochanter ; the head of the bone, in consequence of the disappearance of the neck, had become, to use the language of botanists, *sessile* ; it had descended to a level with the trochanter, and indeed bore the strongest miniature resemblance to those specimens of diseased femur, which, from the days of Trioen, to the present time, have been imposed on the profession as specimens of bony union following fracture of the *cervix femoris*. I need not, I presume, remind the Society of the natural elevation of the head of the femur, in a child, above the level of the trochanter, and the direct influence which the depression of the head of the bone to the level of the trochanters, must necessarily have over the total length of the extremity.

I regret that it is not in my power to exhibit the specimen to the Society ; but, being familiar with

pathological specimens, in consequence of their so frequent occurrence in my dissecting-rooms, and from ^{my} position in the college as conservator of the museums, and having, at the same time, no favourite theory or prejudice to support, it will not readily be supposed that any part of this description has been distorted or exaggerated. My own experience informs me, that a case of this sort must be extremely rare; and I have the testimony further of my friend Mr Benjamin Bell, who, though he has himself paid the greatest attention to this peculiar alteration happening to the trochanters and cervix femoris, and is author of a work on the subject of interstitial absorption of the neck of the femur, a monograph, in my humble opinion, of great merit, has never met with the disease at so early a period of life.

The Continental pathologists, and more particularly Mr Beclard, seem to regard these alterations, which attack not only the trochanters and neck, but also sometimes the head of the bone (as may be seen in all museums), as arising from the continual pressure and weight of the body. The above case offers an insurmountable objection to this theory; and, besides, I have in my possession the vertebræ of a young person which have undergone this alteration, and in whom all the other bones of the body were perfectly sound.



