In summary, the ancient Greek meaning of the word was to describe a state of exhaustion, exposure, and hunger, the hunger occurring naturally. In mediaeval English the word came to signify an illogical mental disorder characterised by an extreme, perpetual, animal type of hunger, which seems to approximate its current use by the psychiatric community. In a non-medical, general sense, however, it may be used to express extreme voraciousness.

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- 3 Xenophon. *The Persian expedition. (Anabasis.)* Harmondsworth: Penguin Books, 1972:49.
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A "cracking" complication of hemiarthroplasty of the hip

Liston is the only person to have performed an operation with a 300% mortality. While amputating a leg he amputated his assistant's fingers and slashed through the coat tails of a distinguished surgeon who was watching. Both the patient and the assistant died of gangrene, and the spectator was so terrified that the knife had pierced his vitals that he dropped dead from fright.¹

It might be thought that since those days surgeons have come a long way with regard to personal morbidity and mortality, but might it be that we are too embarrassed to admit that such cases still occur? We report such a case.

Case report

An 80 year old woman was admitted with an intracapsular fracture of her right femur. During the operation to perform a Thompson's hemiarthroplasty things were going smoothly. The prosthesis was well positioned in the femur, and it was time to reduce it into the acetabulum. This proved to be difficult as the fracture was three weeks old and all structures were tight. The surgeon therefore pushed a bit harder on the head of the prosthesis. A sickening crack was heard. Because the surgeon thought that the femur had fractured the prosthesis was removed, but no fracture could be seen. A slightly smaller prosthesis was then used and cemented in place. As the operation progressed the surgeon began to complain of pain in the left hand. By the end of the procedure his hand had become swollen.

A postoperative radiograph of the patient's hip was fine, but a radiograph of the surgeon's hand showed a spiral fracture of the third metacarpal (figure). It also showed non-union of the scaphoid bone, much to his surprise. He now knew the cause not only of the pain in his hand but also of his two year history of an intermittently weak and aching left wrist. To exclude any serious underlying disorder routine biochemical tests and a Venereal Disease Research Laboratory test were performed. Fortunately, the results of these were normal.

Comment

Although this is the first reported case of a fracture of a metacarpal during a hemiarthroplasty, it is not the first time a surgeon has injured himself while operating. Hamilton Bailey pricked his left index finger while operating, and this left him with a stiff finger, which was later amputated.² Some surgeons were more unfortunate: Semmelweis and Pfannenstiel died from hand infections incurred during surgical work.³

Not surprisingly, hand injuries seem to be the commonest injuries sustained during operations. Brown in 1982 surveyed 183 surgeons who had

lost part of their hands. Although half of them had sustained their injuries after becoming surgeons, it is not stated whether any of these injuries were due to surgical mishaps. Interestingly, some of the surgeons found that having fingers missing enabled them to operate through small holes and therefore increased their skills.³

Radiograph showing spiral fracture of third metacarpal and non-union of scaphoid.

The most painful injury sustained by a surgeon while operating must be that sustained by a young neurosurgical assistant who had to sit down during an operation; unfortunately, the top of the swivel chair fell off and the shaft of the stool entered his anus. Although it did not penetrate his rectum, the damage was severe enough to warrant a defunctioning colostomy.⁴

Three conclusions may be drawn from this brief résumé of personal operative injuries:

- (1) Orthopaedic surgery requires not only brute force and ignorance but brute force, ignorance, and perception of pain.
- (2) If you have a finger missing become an obstetrician or a general surgeon as the smaller hand can reach parts other hands cannot reach.
- (3) Never, never sit down during an operation.

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3 Brown PW. Less than ten—surgeons with amputated fingers. *J Hand Surg* 1982;7:31-7.

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