

ANGULAR PROJECTION OF THE SPINE,  
SUCCESSFULLY TREATED.

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CASE. *Extreme Projection of the Spine of more than Four Years Duration: the Body bent at an Acute Angle on the Thighs, so that the Patient was unable to stand, except by resting his Hands and Arms on his Knees: Effects of Treatment.* Robert, the son of Mr. R. C., aged 7 years, was up to the age of two years apparently a fine child. A projection of the back was first observed when he was four years old, it being then pointed out by the surgeon of an hospital to which he was taken. It appears, however, from the history of the case, that the disease had been progressing some time, probably for nearly two years, as at that period the child had the measles severely, and was afterwards weak and ailing; troubled with cough and difficulty in breathing, and frequently made particular complaints of pain in his back; he also stooped a good deal, and in walking placed his hands on his knees.

When first observed, the projection of his spine was "about the size of a walnut". After undergoing hospital treatment some weeks, he was taken into the country for three months, and upon his return, his back was found to be worse, the projection being much larger, and the body much emaciated. He was taken in succession to two other hospitals, where tonics and cod-liver oil were administered; at the last of which the surgeon under whose care he was, stated to the mother, that "it was one of the worst cases he had seen".

Subsequently, advice was sought at another Spinal Institution. Steel stays were ordered; but the mother was assured that "the boy could never be cured".

In April 1857, he was recommended to me by the Reverend R. S. Cummins, of St. George-the-Martyr, Queen's Square. I found the case to be a very extreme one of angular projection; but expressed my conviction that it was capable of amelioration, if not of complete cure.

The boy presented a remarkable appearance: his body was curved forward on his thighs, and the knees were bent, so that his hands and arms rested upon them, while the lower part of the trunk almost came in contact with his heels, and, therefore, with the floor. It was only in this position that he was able to move about, and that with great difficulty. From being almost always in this position, the hip-joints had become much contracted. The back presented a very large posterior projection of the lower dorsal, and almost the whole of the lumbar vertebræ, while the caries of the bodies of these vertebræ was so considerable as to permit a forward inclination of the trunk to such an extent that the lower costal cartilages were situated within the limits of the crests of the ilia. The shoulders were

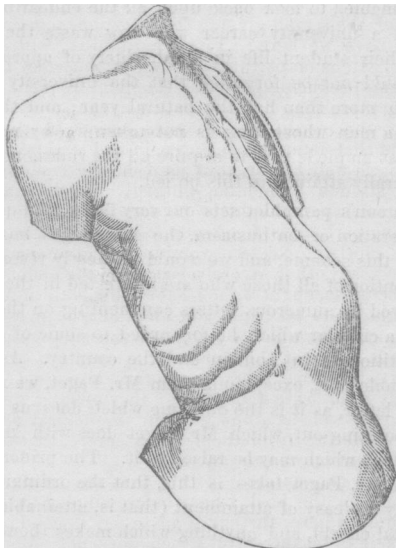


Fig. 1.

very high, and the left scapula was very prominent; his complexion was dusky, the skin was dry, with a good deal of papular eruption; he was extremely emaciated, complained of chilliness, succeeded by heats, and was very fretful; he had

aching pains in his back, and was exceedingly weak. Micturition was often difficult, so that on this account it was sometimes necessary to use fomentations; the appetite was indifferent; the alvine evacuations were very dark and unhealthy; the patient also suffered from headache, and greatly from cough and difficulty in breathing.

The plan which I adopted was that which I have so long recommended, and so successfully practised in many other cases of extreme angular projection. All weight was removed from the diseased part of the spine: where *caries* is present, recumbency is always essential. Besides the use of the plane, very slight extension was employed, so as gradually to restore the bent spine to its natural position, and each day a little pressure with the flat hand was applied with the same object; a stimulating liniment was rubbed along the spine, and strict attention was paid to the improvement of the general health. Alteratives and mild aperients were first given, and afterwards tonics.

In a case of such long previous duration, and in which a cure must necessarily involve great perseverance, it is needless to give anything like detailed reports of the progress of improvement. The amendment began almost from the time of his first coming under treatment, and was so rapid, considering the nature of the disease, that I do not recollect more than two or three cases so successful within the same period of



Fig. 2.

time. The improvement was steadily progressive during the whole treatment. Within a month or five weeks, the change in the prominence of the spine was such as to be noticed by his mother, and in the course of three months the spine was not only decidedly more erect, but the projection was materially reduced; the shoulders were less elevated, and the scapulae much less prominent; the hips, too, were soon brought into a proper position; he became quite free from pain, and his general personal appearance (his complexion, plumpness, etc.) was very much improved.

It should be mentioned that from the position in which he had so long remained, the knees had become so much contracted, that it was impossible for him to straighten them. For this condition, I used pressure and graduated extension; and, in the course of three months, treatment, as regards the knees, was but little required.

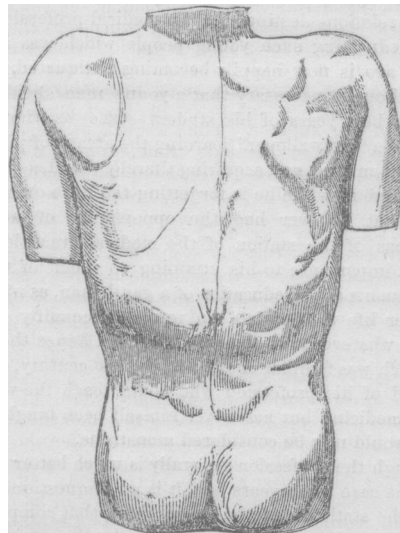


Fig. 3.

The improvement in his spine and general condition went steadily on, and the appearances presented in the woodcuts (Figs. 2 and 3) were the result. The back became quite erect, and the projection quite inconsiderable; and it is now, at the end of nine months, confined to the comparatively small part, where partial ankylosis had taken place. The following measurements, taken at the periods mentioned, show his rapid increase in height:—

Height at first . . . . .	33½ inches.
End of first quarter . . . . .	36½ ”
End of second quarter . . . . .	39 ”
End of third quarter . . . . .	41½ ”

No clearer illustration than this case could be adduced of the improvement of the general health during the progress of the cure of the spinal affection; nor could I wish for a better confirmation of what I have so often asserted—that the temporary recumbency, which is necessary in *this* form of spinal disease, has a direct tendency to improve the state of the health and constitution generally, proper care being taken to correct the condition of the digestive organs, which, in these cases, I have so very generally found out of order, when they have first come under my care. Not only did the deformity give way to the great extent I have described, but the improvement was equally remarkable as regards gain of flesh, strength, and general health.

This case shows, as well as many others, to what a serious extent the disease may proceed when not timely checked in its progress; and it also admirably proves that, even in cases of the most severe description, it is in the power of medical and surgical science to afford most effectual relief; when, too, the extreme state of weakness and deformity to which this patient had been reduced is taken into consideration, the recovery effected in so short a space of time may be regarded as truly gratifying, and as shewing strongly the beneficial effects of the treatment adopted.

In conclusion, I may add with regard to this case what I remarked with reference to the treatment of the disease generally, in the first edition of my work on *Curvatures of the Spine*, published in 1838, page 112:—“It is on the study of the laws of Nature that all human science is founded; and the treatment of disease, to be successful, must have their careful observance for its basis.”

## Reviews and Notices.

A LETTER TO THE PROVOST OF ORIEL, ON A SCHEME FOR MAKING OXFORD MORE ACCESSIBLE TO MEDICAL STUDENTS GENERALLY. From C. H. PEARSON, M.A., Fellow of Oriel College, and late of St. George's Hospital. Second edition. Pamphlet, pp. 35. London: D. Nutt. 1858.

This pamphlet, and the question which it embraces, must be very interesting to the many among our readers who have children or relations destined for the medical profession. The method of educating such young people which was in vogue some time ago is now happily becoming antiquated, and it is no longer thought necessary that a young man should spend the first and best years of his student career as what is commonly called a “potwalloper”, learning the arcana of pill-rolling and medicine-mixing, and acquiring thereby the ideas and manners of a shopboy, while he is forgetting the little of “humane learning” that he ever had the opportunity of acquiring. Modern ideas of the station of the medical practitioner give a more just importance to his attaining so much of the ordinary constituents of the education of a gentleman, as will enable him in after life to associate on terms of equality with his patients, in whatever rank they may be; and hence the phenomenon, which was familiar enough in the last century, of a man at the head of his profession who could teach the world the science of medicine but had never himself been taught that of grammar, would now be considered monstrous.

But, though the profession generally is much better educated than was the case some years ago, it is an unquestionable fact, proved by the statistics of the universities, that comparatively very few men commence their education by the attainment of a university degree, though that distinction is as much appre-

ciated as it ever was, and as it will always be while our two noble universities continue to maintain their present eminence. In saying this, we designedly limit ourselves to the Universities of Oxford and Cambridge, as they are the only ones in England, except those strictly theological, which compel residence and enforce collegiate discipline, and therefore the only ones which impart a distinctive character to their alumni. On this head, our author tells us that the number of medical degrees conferred at Oxford has scarcely averaged more than two a year in the last five-and-twenty years. The reason of this is, of course, to be sought in the expense of time and money involved in a university education, and in the doubt whether the time so spent might not be more usefully employed in learning the necessary rudiments of the profession which is to employ the whole of the after life, instead of acquiring an imperfect and perhaps transient knowledge of things which are, after all, only accessories to professional success. The doubt is a wise one, and we would not be supposed to be here recommending a university course as a general or indeed usual preliminary to the professional education of a medical man.

But there are many students whose destination is surgery or general practice, but whose position will probably be sufficiently good, and whose tastes and habits are sufficiently literary, to make it worth the while of their friends to send them to the university, if the items of time and expense were less formidable. It is for this class that Mr. PEARSON'S plan is designed, and it is in its principle an extension of the scheme of A.A. degrees which has lately attracted so much notice. It is, however, divested of a principal feature in that scheme; for, whereas the Oxford examiners propose to confer the final degree (of A.A.) on candidates found qualified by examination, but who have never resided nor submitted to any collegiate discipline, Mr. Pearson proposes to apply this principle to the previous examination only, which now requires a year's residence, and only to those candidates who are to proceed in medicine. The effect of this will be, that a degree in medicine will be procurable in two years, instead of three as at present, by persons who are not candidates for honours. The position of the latter will be quite unaffected. We confess that we regard the scheme, as far as it goes, as quite unexceptionable; and doubt not, if it were put in force, that many men would be enabled to look back upon all the endearing remembrances of a university career who now waste the first two years of their student life in the drudgery of apprenticeship. For it should not be forgotten that the university year embraces little more than half the natural year; and that, in the vacations, a man whose time is not taken up by reading for honours has ample leisure to acquire all the rudimentary knowledge generally attained in this period.

Mr. Pearson's pamphlet sets out very fairly, and quite without exaggeration or enthusiasm, the advantages he hopes to secure by this scheme, and we would earnestly recommend it to the attention of all those who are interested in the question. It is followed by numerous letters commenting on the plan, in answer to a circular which he forwarded to some of the principal practitioners in London and the country. As all these are favourable to it, except one from Mr. Paget, we need only notice the latter, as it is the only one which does us the good office of pointing out, which Mr. Paget does with great force, the objections which may be raised to it. The principal objection which Mr. Paget takes is this, that the ordinary degrees are already too easy of attainment (that is, attainable with too little mental effort), and anything which makes them more so, will render them even less likely to be of service to the future medical practitioner. The whole force of this objection, however, rests upon the assumption, that there is something in Mr. Pearson's plan which will confer a degree on a man after less reading than the present system. Nothing of this kind,