NOTE ON A CASE OF TRAUMATIC MYOSITIS OSSIFICANS.
BY MAJOR P. EVANS.
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CORPORAL B. was admitted to hospital on May 7, 1908, complaining of pain in the right thigh on movement, and swelling of the front of the thigh. He stated that he had been troubled with it for two months past, following a kick.

On examination, a distinct bony tumour was felt over the middle third of the front of the thigh, and an X-ray photograph gave a definite shadow of the tumour (see photograph). On May 11th the patient was placed under ether, and a long incision was made down the thigh on the inner side of the middle line. After incising the deep fascia the tumour was exposed by moving to one side the rectus femoris and cutting through the vastus internus and crureus; it was attached to the periosteum and was slightly movable on the shaft of the femur. The tumour was removed, and consisted of soft bone: the removal necessitated sacrificing a considerable portion of the periosteum. The muscles were brought together in layers with catgut sutures, and a tube was inserted at the lower end. On May 12th the tube was removed, and the aperture closed with horse-hair sutures, previously inserted. The patient made an uninterrupted recovery and was discharged to duty on June 11th. On September 5th, X-ray examination showed no tumour, and the patient suffered no inconvenience from the operation; he was able then to play football.

Remarks.—This is the second case of the kind which has come under my notice during the last two years. There is no account of them in the ordinary text-books. They are, I believe, absolutely innocent tumours, and when freely removed never recur. They are possibly caused by ossification in intramuscular haematomata. Tognetti (La Liguria Medica, May, 1908) has reported a case: vide the Medical Review, vol. ii., No. 7, July, 1908.

The parts removed were submitted to Dr. A. F. Furgusson, Professor of Pathology, School of Medicine, Kasr-el-Aini, who kindly furnished the following report:—

"I cannot find any satisfactory evidence of the existence of a tumour in any part of it. This statement refers only to the soft tissues surrounding and in contact with the piece of bone which you sent me. The tissue is made up of small tracts of voluntary muscle (in a degenerated condition), the individual bundles of which are separated by fibrous tissue, also somewhat degenerated. This latter tissue has the characters of granulation tissue, and is in some parts much more cellular than others. Irregular fragments of bone occur throughout it; the margins of these are indicated by the presence of large osteoclasts, which doubtless are concerned with the absorption of these particles of bone. These facts,
To illustrate "Note on a case of Traumatic Myositis Ossificans."
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if they represent the salient features of the condition in question, lead me towards the conclusion that the trouble is essentially of inflammatory nature."

A METHOD OF PREVENTING SOIL CONTAMINATION IN FIELD URINALS.

BY CAPTAIN R. MCKENZIE SKINNER.

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The following plan, which, as far as I know, is original, has been found so satisfactory that I am tempted to send particulars of it to the Journal.

Where it is necessary to use urine tubs or buckets, whether by night in barrack verandahs, on the cement floor of permanent latrines, or on the ground in camps, to ensure a minimum of surface pollution, a box or metal tray about six inches deep and somewhat larger than the bucket should be filled with dry earth, and on this the bucket should be placed. This raises it to a more convenient height, and all splashings fall upon the earth, which can be changed from time to time as necessary.

This arrangement is quite inexpensive and most satisfactory where one or two tubs only are required, as for night use in barracks, or tent lines, or near the canteen in camps.

Where the urinal is for the use of a battalion, a mound of earth of sufficient length may be backed on both sides by a piece of matchboarding, and the surface of the earth cut off with a spade from time to time. But if possible it is then better to make the ground plan thus:

For the greater part of this summer I have been in a camp having permanent latrines with cement floors on which the urine buckets stood, and until this scheme was adopted I found it quite impossible to keep the floors dry and sweet.