

A somewhat severe, dry cupping will also sometimes heal a chronic sore or sinus that has resisted months of other treatment.

Of the use of the congesting glass to the penis in anterior urethritis, the writer has no personal experience, though he hears excellent reports from his civilian friends.

In conclusion, these notes are not intended to instruct those who already use the hyperæmic treatment, but to encourage those who have not yet begun it to make a start.

The references to Professor Bier's opinions have throughout been taken from the French translation of the fourth edition of his "Hyperæmie als Heilmittel." The later editions are not at present accessible to the writer.

FRACTURE OF THE ASTRAGALUS.

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RECENTLY five cases of fracture of the most posterior portion of the astragalus have come to my notice. Attention was directed to the first case owing to the severity of the apparently sprained ankle, following a comparatively small degree of violence, viz., kicking a football.

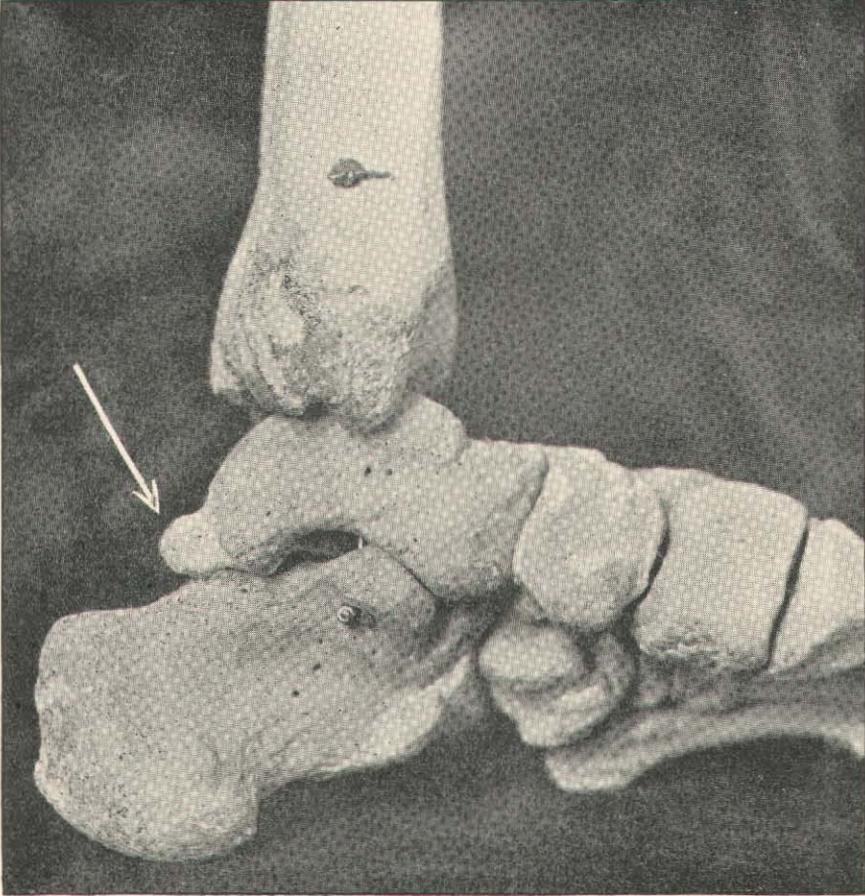
Subsequently the other cases were detected by examining all skiagrams of sprained ankles admitted to hospital. The mode of injury in these cases was falling down steps, twisting the ankle by stepping on a stone whilst walking, alighting on the heel on a tuft of grass in jumping over an obstacle. In two of the cases the patients had apparently been well for some time, but on walking they complained of pain at the seat of injury, and an examination by "X" rays revealed a fracture.

The portion of the astragalus broken was the small posterior process which articulates with the os calcis below, and is grooved on its upper portion for the tendon of the flexor longus hallucis. The fracture involved the joint. Swelling was particularly noticeable on either side of the tendo Achillis. In one case only was the whole process broken off.

The fracture seems most likely to occur when the foot is hyperextended and violence is at the same time applied to the heel, or dorsum of the foot, driving the os calcis upwards. In this position the astragalus is kept fixed by the tibia and the small process of the astragalus is unsupported, and therefore in a position to be easily broken off by the os calcis being driven upwards.

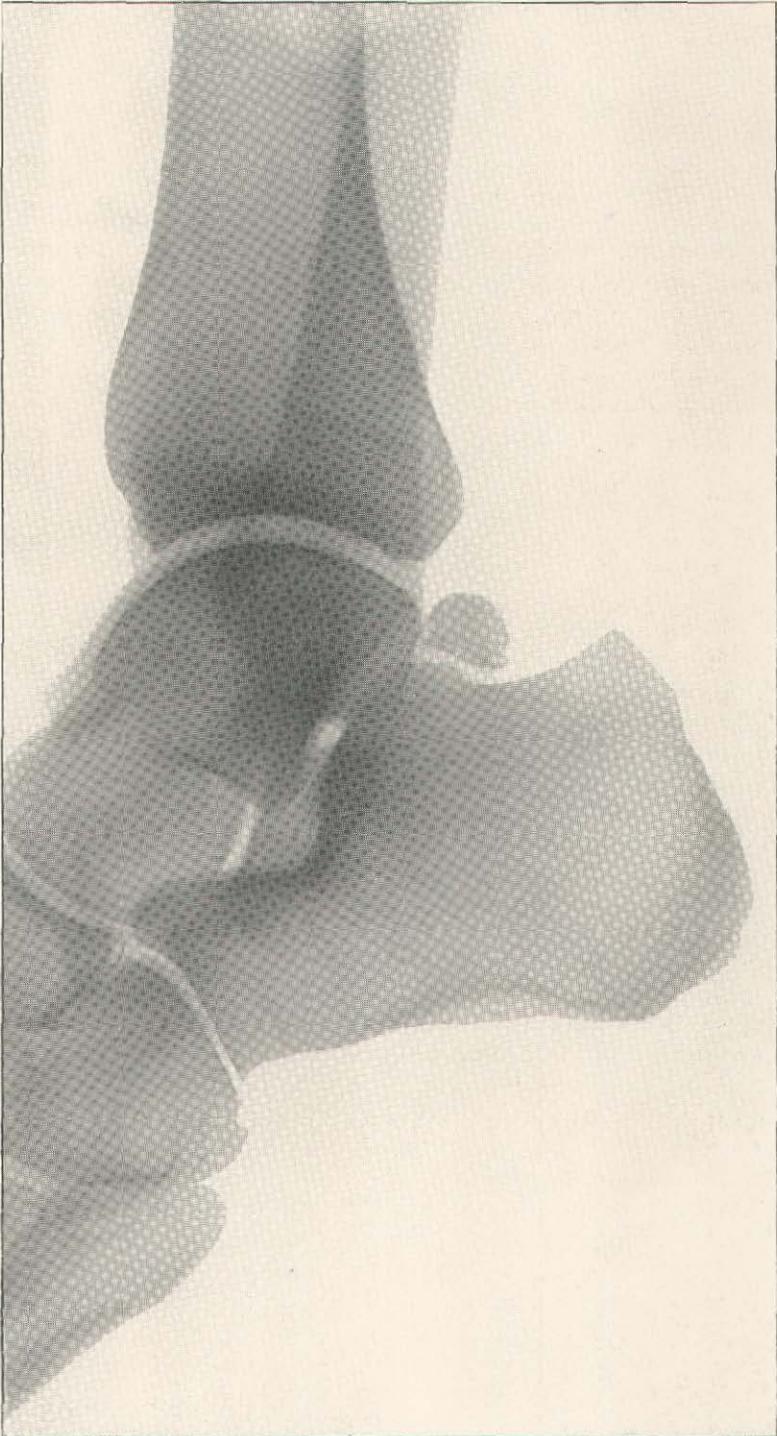
As I have not seen the condition specially mentioned, it would be interesting to know if the fracture has been noticed by others, as it seems possible that some of the severe sprains which do not easily yield to treatment, and where the pain persists, may be due to this cause.

The accompanying skiagram shows the most marked case, and the photograph of the skeleton foot shows the process which becomes fractured.



Photograph of the bones of the foot; the arrow points to the process which is liable to fracture.

I am indebted to Lieutenant-Colonel J. Meek, R.A.M.C., Officer in charge, Alexandra Hospital, Cosham, for permission to publish this note.



To illustrate "Fracture of Astragalus."

By Major ADYE CURRAN.