

New Instruments.

A NEW FORM OF SPLINT FOR THE THUMB.¹

BY JOEL E. GOLDTHWAIT, M.D., BOSTON.

This splint will be found useful in securing fixation of the thumb, and possesses the special advantage of not restricting the motions of the wrist or fingers, and hence can be worn without serious inconvenience to one's business. It can be used in any conditions where fixation is demanded, and is especially useful in the lesser injuries, such as "base-ball thumb," where the more bulky outside splints would not be tolerated.

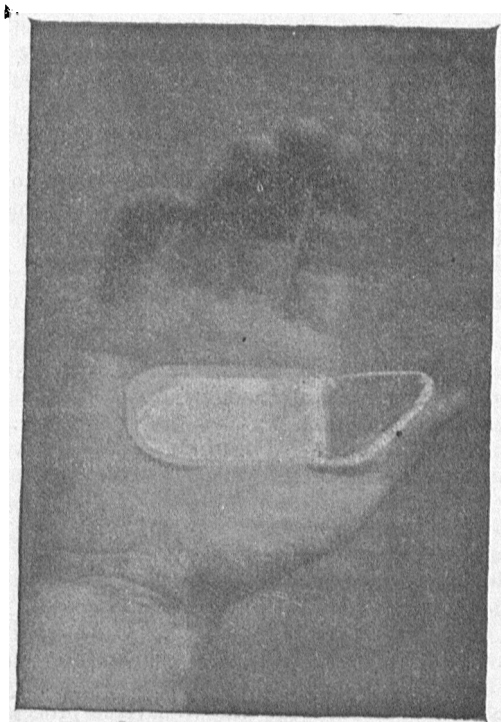


FIG. 1.

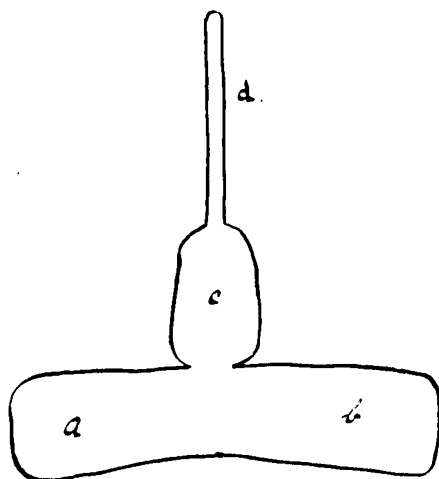


FIG. 2.

It is made of tin, and can be cut out by any one in a very few minutes. The pattern of the splint is

¹ Shown at the meeting of the Surgical Section of the Suffolk District Medical Society, May 6, 1891.

shown in Figure 2, and the following dimensions may be found convenient; they are the measurements for a splint for the average adult hand.

The base (*a b*) should be seven inches long and one and one-half inches wide. The thumb-piece (*c*) should be two inches long, and one and three-quarter inches wide in the widest part. The tongue (*d*) is a narrow strip one-quarter of an inch wide and four inches long.

The thumb-piece and base are bent, at their point of juncture, to an acute angle, while the tongue is bent around the base piece and holds the two parts rigid. The wings (*a* and *b*) are bent to clasp the hand while the sides of the thumb-piece are rolled up to form a trough for the thumb to rest in. It is held in place by two strips of adhesive plaster, one around the thumb and the other around the hand. No padding is necessary, but to prevent chafing the edges of the splint should be bound with adhesive plaster.

Medical Progress.

RECENT PROGRESS IN ANATOMY.

BY THOMAS DWIGHT, M.D.

OSSIFICATION IN THE HEAD OF THE HUMERUS AT BIRTH.¹

DR. HERBERT R. SPENCER has examined the head of the humerus on both sides in 180 fetuses, many of which, however, were immature. He suggests that we may assume that those weighing six pounds or more were mature, of course, however, without a view to statistics. He found a bony nucleus in 14 cases, usually of the size of a "No. 6" shot. Of the fetuses 40 weighed seven pounds or more, and nine of these had the epiphysis. Dr. Spencer states that all the 14 in which bone was found were probably mature, and all of them had a bony centre at the lower end of the femur. The conclusions which he draws are necessarily guarded. They are:

"First, that a centre of ossification is not rarely met with in the head of the humerus of mature fetuses at the time of birth.

"Second, that in large fetuses (that is, weighing seven pounds or more) the centre is commonly observed—in my own cases, in at least 22.5 per cent. This frequent occurrence in large still-born children would seem to have some medico-legal importance."

Investigations of this kind deserve great encouragement. The statements concerning ossification seem to be to a great extent copied from one book to another. Some of them are utterly wrong, and pretty nearly the whole subject needs revision.

THE DIFFERENCE OF THE HEIGHT STANDING AND SITTING.²

Professor Ricardi, of Modena, reports observations on 1,185 persons of all ages, of whom 584 were males and 601 females. The sitting height is almost always greater than half the total height. Thus it exceeds it in 95.4 per cent., equals it in 2.7 per cent., and falls below it in 1.9 per cent. In adult males the sitting height is 52 per cent., and in females 53.2 per cent. of the standing height, showing that in women the trunk

¹ Journal of Anatomy and Physiology, xxv, July, 1891.

² We are indebted for this to an abstract by Dr. Collignon in l'Anthropologie, 1891, tome ii, No. 4.