

COMPOUND DISLOCATION OF RIGHT ANKLE-JOINT.

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JOSEPH O'K., while riding behind a horse that became unmanageable, the evening of March 11, 1879, jumped from the wagon, and sustained a compound dislocation of the right ankle-joint. The flesh over the joint was lacerated two and a half inches, and the entire end of the tibia protruded through the wound. There was also partial dislocation of the scaphoid and cuboid bones of the same foot.

He was placed under the influence of chloroform, and the wound dressed with warm water. No disinfectants were used, and the dislocation was reduced. The limb was bound up in a thick wadding of cotton and splints, and he returned home, a distance of one and a half miles, over a rough road, where the temporary dressings were removed. A splint on the outer side of leg and cold-water dressings were then applied.

The day following antiseptic dressings were commenced. The wound was dressed every third day for four weeks, the patient being anæsthetized each time. With the exception of an abscess forming and opening spontaneously on the outside of the leg just about the ankle-joint, the wound progressed favorably under the following treatment: Splints on outside of leg and foot, and carbolic-acid dressings, except a few days, when flaxseed poultices were applied to encourage granulations. With the exception of a very few doses of morphine to obtain sleep, no drugs whatever were taken. There were only a few days that the temperature or pulse was above the normal standard; consequently at no time was his life compromised. There is at this writing, September 10th, a small opening over the joint and a slight discharge, which is steadily and gradually decreasing in quantity. The joint is firmly ankylosed, with the toes pointing slightly downwards. No necrosis can be discovered in or about the joint. The patient was confined to his bed ninety-six days. Since then he has been about on his crutches, and thinks he can bear two thirds of his weight — one hundred and sixty pounds — on the injured foot. Dr. Bond, of Libertyville, whose counsel and advice were of much value, occasionally saw the patient. I have ventured to report this case as furnishing proof that it is not always necessary to amputate or excise in compound dislocations of ankle-joints, as recommended by the majority of surgeons, from Hippocrates down to modern authors.

THE SECRETARY OF WAR'S OPINION ON DR. HAMMOND'S CASE.

In March last, an act of Congress was passed for the relief of Dr. W. A. Hammond, late surgeon-general of the army, and upon recommendation of the secretary of war the findings and sentence of the general court-martial promulgated in 1864 have been annulled and set aside by the president, and Dr. Hammond is placed on the retired list of the army as surgeon-general without back, present, or future pay or allowance of any kind whatsoever. The following is the opinion of the secretary of war referred to in the foregoing order. After reciting the law as above, and giving a synopsis of the charges upon which Surgeon-General Hammond was tried, the secretary continues in his report to the president: —

I have the honor to submit my conclusions upon the case, as follows: —

First. In construing the act of Congress of April 16, 1862, as not depriving the surgeon-general of the power to purchase medical supplies, Dr. Hammond was guilty of no crime. The construction he placed upon that act, whether erroneous or not, was entirely consonant with an honest purpose, and such a purpose must be presumed until the contrary appears. The act authorized medical purveyors to purchase all medical supplies under the direction of the surgeon-general. The surgeon-general held that the power to make purchases in person, which had been previously exercised by him and by his predecessor, was not taken away by this act; that the purveyors were placed under his orders for the purpose of aiding him in the performance of that duty, rendered very onerous at that time by a great war. He held that what he could command another to do he could do himself; that what he could do indirectly he could do directly. I am clearly of the opinion that the construction of the act was not so palpably wrong as to render all acts done in performance of it presumably criminal. It was the duty of the surgeon-general to construe and execute the act.

Second. The acts of the surgeon-general in making purchases of medical supplies in person and not through a medical purveyor, and in directing purveyors to purchase particular articles at specified prices from certain persons, were not acts in themselves criminal. The mere fact that these things were done did not raise a presumption of guilt to be overthrown by the accused. The burden was upon the prosecution to establish, by competent evidence and beyond a reasonable doubt, that the acts complained of were done with corrupt intent.

Third. Upon the question of intent the board recently convened finds that there is no evidence that the surgeon-general was interested in or profited by the contracts which were charged as fraudulent. It is further found by the board that there is no direct evidence to establish corruption, and that the circumstantial evidence upon the question of intent is conflicting and some of it incomplete. But the board sustains the sentence of the court-martial largely upon the ground that the acts complained of were unlawful in themselves, and that therefore a fraudulent intent must be presumed until the contrary is established by the accused, the burden being on him. This I regard as a grave error, for the reasons already stated.

Fourth. In my opinion the evidence does not establish the charge of corruption, and it is only by assuming that the acts complained of were in themselves so palpably unlawful as to raise the presumption of criminal intent that any sufficient foundation for the sentence of the court-martial can be found, and that assumption not being warranted by the terms of the statute, the finding cannot be upheld.

Fifth. The charge of falsehood is not sustained. Dr. Hammond stated in a private letter to Dr. Cooper that General Halleck had requested the detail of Surgeon Murray for duty at Philadelphia. It was charged that General Halleck had not made this identical request, but it was admitted that he had requested the transfer of Dr. Murray from the South to Eastern hospital duty. It was in proof that Dr. Murray had urgently requested General Halleck to secure his transfer to Philadelphia, and it is not improbable that this was mentioned by General Halleck to Dr. Hammond, as the latter claims. General Halleck testified that he had no recollection of having mentioned Philadelphia as the place to which he desired to have Dr. Murray sent. There is room for doubt as to what the surgeon-general understood the request of General Halleck to be. There is still greater room for the conclusion that an honest misunderstanding arose between the two, and I cannot but regard it as a very harsh and unjust judgment which pronounced the surgeon-general guilty upon this charge.

I recommend that the finding and sentence in the case of Surgeon-General William A. Hammond, referred to, be annulled and set aside, and that the name of said William A. Hammond be placed on the retired list of the army as surgeon-general, without back, present, or future pay, or allowances of any kind whatsoever.

GEORGE W. McCRARY, Secretary of War.

THE METRIC SYSTEM IN MEDICINE.

OLD STYLE.		METRIC.
		Gms.
℥i. or gr. i. equals	.	06
f℥i. or ℥i. equals	.	4
f℥i. or ℥i. equals	.	32

The decimal line instead of *points* makes errors impossible.

As .06 (Drug) is less than a grain, while 4. and 32. (Vehicle) are more than the drachm and ounce, there is no danger of giving too large doses of strong drugs.

C. C. used for Gms. causes an error of 5 per cent. [excess].

A teaspoon is 5 Gms.; a tablespoon, 20 Gms.