

FRACTURE OF THE CARPAL SCAPHOID, WITH HABITUAL DISLOCATION OF THE CENTRAL FRAGMENT.

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STIMSON (ANNALS OF SURGERY, Vol. xxxv, page 574) has reported two cases of scaphoid fracture with dislocation of one of the fragments, and has collected from the literature three similar cases. The following is especially interesting, as it is to my knowledge the first case of habitual dislocation to be reported.

E. D., laborer, aged thirty-two years, presented himself at my service in the Dispensary Clinic of the University of California, department under Professor Harry M. Sherman, on November 1, 1904, for a forward metacarpophalangeal dislocation of the little finger, right hand. While the finger was being dressed the patient called my attention to his left wrist, which he said had been injured three years before. On the anterior surface of this wrist and directly over the scaphoid carpal was a small bony prominence about the size of a pea. This could be reduced with slight force when the hand was flexed upon the wrist, but remained dislocated in all other positions in which the hand was placed.

A radiograph showed a transverse fracture of the carpal scaphoid, the dislocated bone being the small fragment adjoining the os magnum and semilunar. The patient could dislocate the fragment easily, effecting this several times for me by grasping tightly the edge of the operating-table. He stated that the dislocation frequently occurred when he worked with pick and shovel, but he had always been able to reduce it readily. The left hand was as strong as the other, and all the movements of the hand and wrist were normal. The patient complained only of a slight grinding in the wrist at times, but said that it was never accompanied by pain.

On inquiry, he stated that the injury had been caused by a fall three years before while attempting to board a moving street-car. He was in a drunken condition at the time, but remembered having grasped the car-rail with his left hand and having been thrown forcibly to the pavement. He could give no further details of the accident. The wrist was greatly swollen for a period of three months following the injury, during which time he received no surgical attendance. Full function returned in about one year's time.