

It has been urged by some that this method has the following disadvantages:—

(1) Delayed union may result from the constant manipulation and unrest of the broken bone.

(2) Thrombi may be displaced and cause embolism.

After watching the course and results of 200 cases, 50 of which I either massaged myself, or personally supervised, I have no hesitation in saying that the fractures unite quicker and better under the massage treatment than without it. The only two patients who did not appear to derive benefit from the massage were both persons, one male and female, who had oblique fractures of the tibia. They were both over fifty years of age, and had a feeble circulation and very weak and flabby tissues. In both cases a sort of solid œdema appeared which no amount of elevation or massage could dispel, and at the end of three to four weeks it was found that practically no union had occurred. They subsequently united firmly after a prolonged period of treatment.

The second objection, viz., that thrombi may be displaced and cause embolism, seems theoretically to be one of some weight; but in my experience I have never met with this accident, nor have I ever heard of its occurrence in any case.

No better instance of the use of massage can be given than in the case of Colles' fracture. Under ordinary treatment, the union of this fracture almost always involves a large number of tendons, running in bony grooves lined with synovial membrane, and stiffness, either temporary or permanent, may result. Adhesions form in the wrist joint and finally, when the union is firm, the patient is suffering from stiff fingers and a stiff wrist. If massage is adopted from the very beginning in these cases, most admirable results are obtained. Splints, such as Carr's or straight antero-posterior, not extending further than the knuckles, are applied and retained for about a week to ten days, when they are entirely removed. For the first three to five days it is only necessary to remove the dorsal splint for the purposes of massage; after this the arm should be rubbed on both surfaces and passive movements of the fingers and wrist commenced. After ten days the arm should be carried in a sling without any other support than a bandage; some surgeons dispense with all splints after the first week, simply placing the arm in a sling which does

not extend beyond the wrist, so that the weight of the hand may tend to correct any deformity which may exist in a lateral direction. After the seventeenth to the twenty-first day, no support whatever is required, and the more the patient uses the arm and hand the better. After this form of fracture, free movement of the hand and fingers is the great aim of the surgeon, and he need have no fear of non-union as a result of his treatment, as this is, I believe, quite unknown.

Intra-capsular fracture of the femur is another example which might be quoted as giving good results after treatment by massage, but I do not think it necessary to go into details in this paper. In all cases, a certain amount of common sense is required in the performance of the rubbing, also some knowledge of anatomy and surgery, otherwise harm can easily be done. Also this method takes up a good deal of time, and this may be the reason why the practice has not become more general; but after a short explanation on the part of the surgeon, I feel sure that any nurse or dresser of ordinary intelligence could easily undertake this treatment with success.

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The following course of lectures to nurses delivered weekly will commence on Friday, 1st February, at 4.30 p.m., and by the courtesy of the Lecturers and Hospital Committee, are open to all nurses free of charge. The Matron will supply further particulars if enquiries are addressed to her.

Friday, February 1st.—“The Nursing of Orthopædic Patients,” Mr. Noble Smith.

Friday, February 8th.—“The Nursing of Orthopædic Patients,” Mr. Noble Smith.

Friday, February 15th.—“The Physiology of Digestion, etc.,” Mr. Chisholm Williams.

Friday, February 22nd.—“The Nursing of Surgical Cases, etc.,” Mr. Chisholm Williams.

Friday, March 1st.—“The Human Skeleton,” Mr. John Poland.

Friday, March 8th.—“The Muscles,” Mr. John Poland.

Friday, March 15th.—“Surgical Dressings,” Mr. Jackson Clarke.

Friday, March 22nd.—“Bandaging,” Mr. Jackson Clarke.

Friday, March 29th.—“Diets,” Mr. Jackson Clarke.

[previous page](#)

[next page](#)