

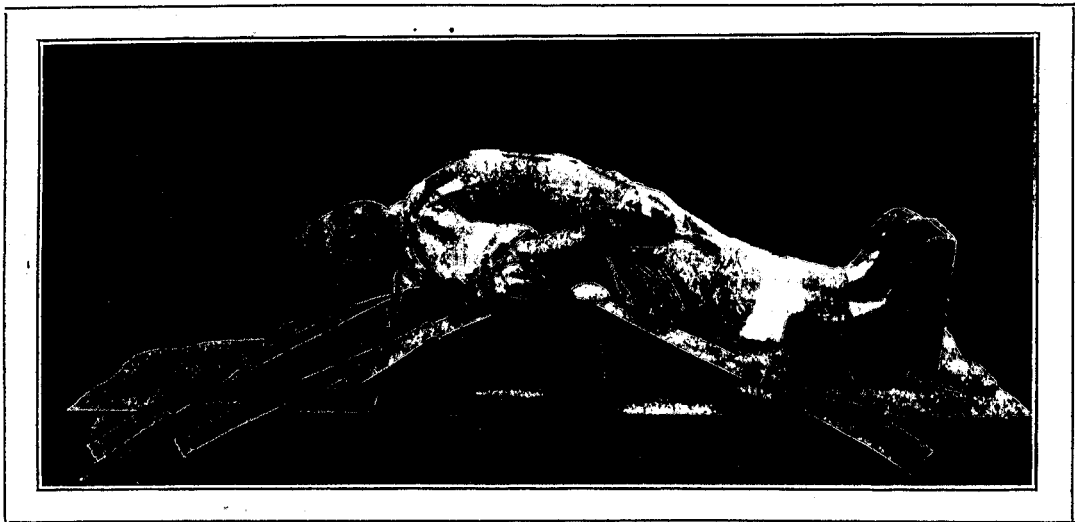
The Mechanical Treatment of Spinal Caries and of Tuberculous Abscesses of Bony Origin.

Last week we devoted space to a general description of Lord Mayor Treloar's Cripples' Home at Alton, or hospital, as it is more justly called, for indeed it is a hospital of 200 beds. This week, with the aid of literature kindly supplied to us by the Resident Medical Superintendent, Mr. H. J. Gauvain, in which he has described at length the guiding principles, and methods of the treatment there, we propose to consider the medical side of the work. In no sense is this Cripples' Home merely an asylum for the care of phy-

time comes when the disease is so threatening that instant active treatment is necessary."

The object of the Home, its founder explained, is the curative treatment of such cases, amidst pure air and wholesome surroundings, the children stay till they are cured, or, at the worst, until every effort has been made to successfully combat the disease. Mr. Gauvain said on the same occasion that they are a class of case which in hospital, perhaps, are not welcomed quite as much because they are so long, and because they "block a bed," but at Alton, where everything is in their favour, to work amongst them is a privilege of which he is very proud indeed.

Much of the work of the medical staff at



"WHEELBARROW" SPLINT,

Used for Spinal Caries where there is much Spasm of the Psoas Muscles.

sically defective children. Its primary objects are their active treatment and cure.

There is no doubt that in special hospitals the treatment and care of special classes of cases are carried to the highest point of perfection, and this pre-eminently holds good of the treatment of crippled children, both tuberculous and non-tuberculous, for whose benefit the Home exists. As Sir William Treloar pointed out in his speech to the members of the British Medical Association, who visited the Institution last year, "the treatment of children suffering from tuberculous disease of the bones is, of necessity, a long and costly process, and the demand on the accommodation of our hospitals is such that in most cases these children have to be treated as out-patients, since the beds in our hospitals must be devoted to acute cases, and cannot be allotted to the tuberculous cripple until the

Alton consists in the treatment of tuberculous abscesses of bony origin, and the method adopted is conservative mainly. In a paper on the "technique of aspiration" in connection with this treatment—the method usually employed—Dr. Jacques Calvé and Mr. Gauvain in a paper contributed conjointly to the *Lancet* write: "A first principle governing the treatment of tuberculous abscesses is the avoidance of their spontaneous opening and subsequent sinus formation. The formation of a sinus is almost always followed by secondary infection, not only of the sinus itself, but also of the focus of origin of the disease, and when this focus is an extensive bony one, as in cases of hip disease and spinal caries, the consequences which ensue are often disastrous. Profuse suppuration and fever exhaust the patients and may themselves cause death, while a general infection is not uncommon.

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