

**ON THE TREATMENT OF SPINAL  
CURVATURES BY EXTENSION  
AND JACKET: WITH REMARKS  
ON SOME AFFECTIONS OF THE  
HIP, KNEE, AND ANKLE-JOINTS**

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On the Treatment of Spinal Curvatures by Extension and Jacket: With Remarks on Some Affections of the Hip, Knee, and Ankle-Joints by H. Macnaughton Jones

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**H. MACNAUGHTON JONES**

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ON THE TREATMENT  
OF  
SPINAL CURVATURES  
BY EXTENSION AND JACKET

*WITH REMARKS ON SOME AFFECTIONS OF THE  
HIP, KNEE, AND ANKLE-JOINTS*

BY  
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1884

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To my old friend

DR. LEWIS A. SAYRE,

THIS SHORT ESSAY IS, BY PERMISSION, INSCRIBED,  
IN MEMORY OF MANY HOURS OF PLEASANT SCIENTIFIC AND SOCIAL  
INTERCOURSE SPENT WITH HIM,  
AND IN RECOGNITION OF HIS GREAT ORIGINAL SKILL  
AS AN ORTHOPEDIC SURGEON.





## P R E F A C E.

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CALLED, as I have been, many times in consultation by medical friends, to determine the advisability of applying Sayre's method in various cases of spinal curvature, I have felt the desire to place in their hands some brief epitome of my individual experience of this plan of treatment. This short essay meets this wish. It is the outcome of constant work in the application of the suspension method since 1877. At the Bath meeting of the British Medical Association in 1878, in detailing the complete history of over fifty cases of spinal curvature treated by Sayre's jacket, I made the remark that "the more I saw of this treatment, the more convinced I was that it was wrong to come to a hurried decision; but that it might require (in any case) months or perhaps years before we should be justified in arriving at decided conclusions as to the special advantages of this spinal support. We are all too prone to run after new forms of wonderful cures, and the concise tests which time alone supplies are overlooked or ignored in our

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desire to applaud a new invention or see in it some advantage over other means which may have failed to satisfy our wishes, and which do not meet all the difficulties that a variety of cases is sure to present. I do not, however, think it right to expect more than average results. Cases will constantly occur that must fail under any treatment, and it may have happened, in the case of the plaster jacket, that it has been applied in instances where no permanent cure, nor indeed temporary benefit, could be effected, so advanced the disease and so great the deformity." I feel, that after over six years' experience, I can now speak a little more confidently. I trust, therefore, that this short essay may be of some use to practitioners, more especially to those who have not had a large experience of this method of treatment. In a letter received recently from Dr. Sayre, in which he refers far too flatteringly to whatever practical knowledge I may have on certain views of his, in the treatment of bone and joint diseases, he, I think, fairly complains of rather ungenerous treatment at the hands of some surgeons. Dr. Sayre's correct conclusion is, "*Magna est veritas et praevalabit,*" and "I can wait." In this brief summary I have written simply from my own personal and everyday practical-experience. Whatever views we may severally hold on questions either of pathology or practice, our common object is to cure disease and relieve suffering, and I have to acknowledge that through the ideas and suggestions of Dr. Sayre, not only

in spinal affections, but also in hip-joint and other bone diseases, I have, acting on the principles as taught by him, both cured disease and relieved suffering. This great ultimate aim of our art is sometimes lost sight of, in wrangling over trifles of detail or questions of individual experience. I am, however, no blind adherent of all the details of Dr. Sayre's methods of treatment, whether in spinal affections, or in those of the hip and knee. He will, however, as a true surgeon, not think the less of me for this independence of opinion. I am equally ready to bear testimony to the good I have been able to effect through the use of Mr. Thomas' splints for affections of the hip and knee; and I have added figures of his hip splints, as applied, for the simple reason, that in practice, and in conversing with some practitioners, I find, that they are still unaware of the value of Mr. Thomas' appliances. The splint I figure shows the form of his splint that I am in the habit of using. I have to thank several of the leading surgical instrument makers, whose names are included in the text, for their kindness in giving me cuts of appliances, and Mr. Ernst, for the privilege of copying a few of the appliances from his work on Orthopædic Apparatus. The second portion of this short essay is devoted to some practical observations on the surgery of the hip, knee, and ankle-joints. It includes special reference to the operation of excision of the hip, with notes of cases on which I have operated, the indications and contra-indications of