Various types of athletic injury

Muscle—mild, moderate, severe, including rupture Joint—mild: ligamentous, no synovial effusion

moderate: synovial effusion, slight tearing of ligaments

severe: synovial effusion, severe tear or rupture of ligaments, with

possible involvement of intra-articular structures such as in

the knee, the menisci.

DISCUSSION

Question: Is there any early time limit to injecting torn muscles with a haematoma; how soon would you inject them—at once, or would you rather wait until you think the bleeding has stopped?

Mr Tucker: I can give you an instance of a man bumping himself in a squash court and feeling nothing until he had a bath and then felt a little stiff. By nine o'clock that night his thigh was swollen like a rugby football, and he was in agony with sciatica. The pain was stopped by injection—not of hydrocortisone but of local anaesthetic and making a little incision next day. Some people will tell you to do nothing for 48 hours, but I think that with a cold compress and varidase or chymoral, perhaps even hyaluronidase, for the first 48 hours a tremendous lot can be done to lessen the amount of haematoma.

Question: During the last 12 years I have had to read a good many case papers from men in the Army, the Navy and the Air Force; I have been struck by the excellent presentation of case notes from the R.A.F. and I wonder whether the Army and the Navy have specialized rehabilitation centres like the one at Headley Court.

Wing-Commander Wynn Parry: The Army has one at Chester, but we use these on a regional basis; for example, if a soldier needs rehabilitation in the South of England he will come to us, and an Air Force patient in the North of England might go to the Army place. The Navy had an extremely good centre during the war, but they stopped it shortly afterwards. I've seen a film of their original centre, and it looked absolutely first-class, but the trouble with rehabilitation in the Navy, as I understand from my naval colleagues, is that you have to be so fit if you are going to be on board ship in all weathers that only the very fittest persons are retained. I think it is true to say still (it certainly was when I was in close contact with

naval orthopaedic surgeons) that anyone in the Navy with a fractured femur is almost always invalided from the service, because even a slight disability is liable to be found out under the rigorous conditions at sea, whereas we in the Air Force would keep pretty well everybody in after a fractured femur unless there was some obvious reason not to.

COMPREHENSIVE REHABILITATION

J. G. Sommerville, M.D.

(Medical Director of Medical Rehabilitation Centre, London and Farnham Park Rehabilitation Centre, Bucks)

The increasing interest in rehabilitation is encouraging to all of us who work in this vast field, and in the short time at my disposal I propose to limit my remarks to the role of medical rehabilitation centres, though I must emphasize that they are only one link in the chain. As already mentioned this morning, it was the late Sir Hugh Griffiths who said that rehabilitation starts in the ambulance and is a continuous process; this is still entirely relevant today. In Britain we have the means, and generally speaking the will, to rehabilitate our patients. Finance, or lack of finance, seldom militates against recovery, although it does hamper development, and I think one of our problems now is to use these facilities to their utmost advantage. It was Hippocrates who once said that "healing is a matter of time but it is also sometimes a matter of opportunity". I think we are all well aware of this, and that it matters tremendously that you have a head injury when driving your car in close proximity to a neurosurgical unit.

I am the medical director of two rehabilitation centres. One is in Camden Town which is a purely outpatient centre not attached to a hospital and is in fact the first in this country, dealing with 80 to 90 patients per day, five days a week on a whole-time basis. The other centre is at Farnham Park in Buckinghamshire; a mixed residential and outpatient centre dealing with 66 inpatients and about 40 day-patients at any one time. So we have between the two organizations facilities for treating about 200 patients on a whole-time