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**Dictionnaire des maladies
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princeps : Panner (maladie de)**

**PANNER, H. J. - An affection of the
capitellum humeri resembling
Calve-Perthes disease of the hip**

In : Acta radiologica, 1927, Vol. 8, pp. 617-8

first declared itself; and, at the same time, I expressly pointed out that the rudimentary body of the diseased vertebra continued to look more or less the same through all those years. I, therefore, cannot agree with Dr. FLEMMING MØLLER, when he likens this vertebra to a caput femoris in a case of Calvé-Perthes disease that has finished its course. On the contrary, in the latter disease there is just the fact that the caput resumes the appearance of its normal osseous structure, and does not continue to show the characteristic opacities side by side with the rarefactions.

To Dr. HEYERDAHL I wish to say that it is true that this vertebral affection resembles Koehler's disease; but, at the same time, there are also differences in their respective pictures, both clinical and roentgenological. In Koehler's disease there is always, as far as I know, complete restitution — in contrast to what is the case in vertebra plana; and, besides, the roentgen pictures present that difference that in vertebra plana there always appears to be a diminution of the whole space between the two vertebrae that are neighbours, one on each side, to the diseased one; while in Koehler's disease there is always the same — normal — distance between the caput tali and the cuneiform bones, both on the diseased and the healthy side.

XXIII. H. J. Panner, Copenhagen: An Affection of the Capitulum Humeri Resembling Calvé-Perthes' Disease of the Hip¹

The author reports two cases of elbow joint affections, precisely similar both clinically and roentgenologically. The origin, in both cases, was immediately related to a definite trauma. In neither case did the affection cause more than a relatively slight inconvenience to the patient in the form of restricted mobility; there were hardly any pains, but some swelling at the joint. Both subjects were boys between the ages of nine and eleven years; their cases have been under observation for 4 and 16 months, respectively; the clinical healing is nearly complete; at the same time, none of them is yet fully restored.

Both cases have been skiagraphed from time to time. The most characteristic find has been a curious flossiness and diminution of the osseous centre of the capitulum humeri, together with structural changes in the latter. In both cases there has been a gradual return to normal conditions, though not fully attained as yet. In one of the cases there was noticed a slight periosteal thickening of the upper end of the radius, and also the development of a shadow — as of what might be a corpus liberum — in front of the lower part of the humerus.

The conditions described have greatly resembled those which are commonly observed in cases of Calvé-Perthes' hip disease and in the epiphyseal disease of the second metatarsal, but have been totally unlike any other forms of either arthritis or osteitis. In the literature, only one similar case seems to have been described before — by ISHLIN, but without any skiagraphs to illustrate it.

¹ To be published in extenso in a coming no. of the *Acta Radiologica*.
43—270156. *Acta Radiologica*, Vol. VIII, 1927.

Discussion:

CARL KREBS, Aarhus: I can supplement Dr. PANNER's interesting communication by reporting an exactly similar case, which came under my observation in the month of March, this year. It was that of a boy, eight years old, and there had been a somewhat dubious trauma about two years ago. For the last six months he had complained of pains in the elbow, especially when writing.

The boy had been sent to the Radium Station to be treated for an angioma of the forehead, and it was in the course of that treatment that the matter of the pains in the elbow incidentally came out.

Objective examination showed nothing in the way of muscular atrophy, but a certain restriction of the mobility, which lacked about 15° in full flexion, and about the same in extension. Wassermann was negative. Pirquet, after 24 hours negative, after 48 hours slightly positive. Roentgen examination showed normal conditions of the lungs; nor was there anything else abnormal to be observed in any respect.

The skiagraph of the right elbow showed the epiphysis in the capitulum humeri to be of the same size as on the unaffected side, but the structure of the epiphysis itself was irregularly blotched, and the whole picture resembled exactly that of the hip disease described by PERTHES and CALVÉ. (See Fig. 1 and 2 Tab. LIV). I beg leave to suggest the adoption, for this particular affection of the elbow, of the designation: Morbus PANNERII.

XXIV. P. G. K. Bentzon, Copenhagen: Roentgenological Investigations Concerning the Arterial Supply of the Epiphyses

In connection with some studies concerning the pathogenesis of local malacias — published in the *Acta Radiologica*, vol. VI — the author had made a number of stereo-radiographs of bones, especially infantile bones, into which a heavy fluid had been injected in such a manner as to show the direction taken by the arteries of the epiphyses. He now demonstrates part of those stereographs, most of which represent anatomical material, obtained from amputations, into which the fluid — a gelatin solution containing either cinnabar or red lead — has been injected immediately after the operation. His investigations have resulted in the conclusion that in those epiphyses which experience shows us as being most frequently subject to some local malacia the distribution of the arterial supply is such as to make a traumatic lesion of the arteries highly possible, while in others, in which we never find those affections — such as the lower fibular epiphysis, for instance — the distribution is such as to provide a better protection for the arteries, against possible lesions. What specially characterises the condition, as regards several of the epiphyses which may be said to be 'chosen spots' for such lesions, is the fact that the arteries to the epiphyseal nucleus must pass through, or along, the epiphyseal cartilage first.