

one occurred ; the child was apparently well at bed-time, but in the morning the arms and legs were stiff, and his mother states that the feet pointed downwards and the hands were extended. This condition lasted a week before entirely disappearing. During the last three years until the present attack of scarlatina he has been well.

The family history points to a strong neurotic tendency. The paternal grandfather is an epileptic now in Longue Pointe Asylum, and his great-grandfather was an epileptic. His maternal grandmother died of apoplexy. An aunt and an uncle are epileptics. His elder brother died of convulsions at the age of fourteen months.

On examination it became apparent that there were present the symptoms of tetany of the continuous spasm type. The fingers were stiff and extended, lying closely together, flexed at the metacarpo phalangeal joints, the thumbs pressed in upon the middle and index fingers; the hands were flexed on the arms, and the elbows slightly flexed, shoulder not affected and freely movable; the legs were also extended at the ankle, the toes pointing downwards and inwards, and toes flexed, resembling the position in talipes equino-varus, as some have aptly described it. The ankles and wrists were swollen and tender, and the child gave evidence of intense suffering if an attempt was made to move them. The skin was slightly reddened over the joints, the condition resembling acute articular rheumatism. No other muscles were affected. The child cried at intervals from pains in the limbs; doubtless caused by painful muscular cramps. Otherwise, unless moved, he appeared not to suffer. No abnormal condition could be discovered in any other part of the body. Temperature 101°. Urine contained traces of albumen, and excess of phosphates.

In the treatment of the case, salicylate of soda, bromide of sodium and pot bicarb were used. The condition improved after the second day, and all symptoms had disappeared at the end of a week, and the spasms did not recur.

Tapping the course of the nerves or squeezing the limbs increased the contractions. This is analagous to Trousseau's sign, in which in the intermittent variety the spasm can, in the interval, be produced at will by pressure on the larger arteries or nerve trunks.

Chovestek's symptom could not be elicited in the facial.