

# The Maritime Medical News.

A MONTHLY JOURNAL OF MEDICINE AND SURGERY.

Vol. VII.

HALIFAX, N. S., DECEMBER, 1895.

No. 12.

## Original Communications.

### THE REPORT OF A CASE OF OSTEO-MALACIA, WITH SOME REMARKS.

BY FOSTER MACFARLANE, M. D., ST. JOHN, N. B.

[Read before the St. John Medical Society, Oct. 2nd, 1895.]

*Mr. President and Gentlemen:*

In introducing the subject of osteomalacia this evening, I do not do so with a view of adding anything new to the literature that already exists. Neither do I expect that what I may have to say will be new to the members of this society, but the sole object of this paper is to report a case of disease, which is of very rare occurrence and which may be regarded as a pathological curiosity.

Mrs. L. W., aged 42, native of New Brunswick, with a good family history. Was married at the age of 21 years. Previously to her marriage and for some years after she was a robust and healthy person. She has had six pregnancies which resulted as follows: two miscarriages at about the third month of gestation; two premature labors, at about the eighth month, giving birth to two still-born children and two labors at full term with healthy living children. The eldest of

whom is still living aged twenty years, the other having died when it was two years and ten months old. The last pregnancy ended in miscarriage. This occurred nine years ago, when the patient was thirty years old. She states that she has had poor health since she gave birth to her last dead child, fifteen years ago, at which time she had an attack of milk-leg, which confined her to her bed for four months, since then she says that she has suffered more or less most of the time. She had indigestion and constipation and swelling of the lower extremities, particularly marked in the limb in which the phlegmasia had existed. Six years after the miscarriage or eight years ago, the symptoms became more aggravated. Pain commenced over the ribs, in the lower front portion of the chest, and in the back along the spine, particularly marked over the region of the lower lumbar and sacral bones, but was not sufficiently severe to confine her to her bed; but she was able to attend to her household duties up to about two years ago, when she was seized with very severe pains in the lower part of the spine and through the pelvis. Accompanying the pain there was marked hyperaesthesia over the lower spine. The slightest touch, she said, caused pain and a prickling sensation as of pins and needles. Her appetite varied. Some