

be noticed when the back is examined that the patient leans more or less to one side, and if allowed to assume a natural and (to her) comfortable position that the difference is often surprising. As a rule, the aching or weariness is found located in the muscles that form the convexity, because those on the concave or the side towards which the spinal column leans seem to draw it in that direction, and thereby stretch the muscular tissue of the opposite side. In several cases that I have seen this view appeared to be strengthened by the fact that faradic contractility was slightly diminished on the outer convex or weaker side. I have seen cases where the pressure seemed so great as to cause absolute pain from the curvature alone, and I have no doubt that, without any distinct disease as an initial lesion, a permanent tendinous contraction can take place after a time identical with that which requires surgical interference in other parts of the body. Certain it is that in one case that came under my notice the pressure caused all the symptoms of phthisis in the lung pressed upon, all of which were relieved by straightening the spinal column. It is scarcely necessary to enumerate further the complaints of a patient such as I have described if the condition has been one of long standing: the interference with circulation, the indoor life, the restlessness from nervous irritability, the reflex nervous disturbances, the loss of appetite and want of nutrition, will be shown by a tangled chain of evidence that will tax the power and patience of the most accomplished and amiable of diagnosticians. Various forms of uterine disease, with flexions, versions, and prolapses, ovarian engorgements, enlarged and displaced ovaries, will add to the confusion by their perplexing train of symptoms. Relaxation is the word expressive of the one general cause of such conditions, and in our treatment we must bear in mind the atonic condition of every muscle, nerve, and fibre of the whole body. The admirable teachings of Dr. S. Weir Mitchell have enabled us to value, above all things, absolute rest in all such and allied cases; and to insist that, in the majority of those to which I now allude, it is the primary factor in their treatment, is simply to add testimony which is not required to the great success that has attended its trial.

When examination shows us decided weakness in the muscles of the back, I have of late adopted a plan calculated to give the support which is needful until the nutrition and strength of the muscle have been increased by local treatment. Instead of the plaster dressing, which is so valuable at other times, I would suggest the use of some lighter material, cardboard for example, which softened by hot water, easily moulds, and when dry and hard forms a light and admirable splint. It may be applied in this way. A small strip, extending fully the breadth of the back from the lower border of the scapulæ to the most prominent portion of the sacrum, covered with linen, is applied, when softened, over a piece of cotton flannel or

some such material, while the patient is sitting, care having been taken that during the application the spinal column is erect. A few turns of a roller will secure it in place. I usually cut the cardboard heart-shaped, with the base upward and the apex down. When dry, the support will be found complete. The shoulders will rest on a level, the lower borders of the scapulæ firmly fixed upon the upper part of the board, this position being, I think most important. The cardboard can be attached to the corset, taken on and off with it, and, as the clothing fits perfectly without giving the least hint as to what lies beneath, patients will wear it with comfort and willingly for any length of time. But above all things I believe in the daily use of the faradic current, applied to those muscles or groups that it is proposed to strengthen, and to them alone: thus, if the column leans towards the right side, faradize the muscles of the left. This, I believe, is of far greater value than we have been accustomed to consider it, for single muscles can thus be readily exercised to the exclusion of others, and exercise of this kind brings with it increased nutrition, strength, and development in size. With such a power, when applied with the perseverance it demands, what are we not capable of doing? The aurist will tell you of its use in increasing the muscular tonicity of the smallest and most delicate muscles of the inner ear. In diseases of the uterus so powerful is its local action, when properly applied on muscular fibre, as to make permanent a position in many cases which has needed for years the support of the pessary. I may almost predict for the oculist its value in restoring accommodation instead of the ever-fashionable glasses. It is the daily systematic use of a well-contracting current that is followed by the beneficial result, just as it is the mildest form of continued exercise, and not the spasmodic muscular effort, that makes a man powerful. Recommend your patient before retiring to hang by the hands from a horizontal pole for a few moments, to use cold sponging, friction, and, above all, when possible, massage, to exercise daily in the open air, which the back-support invites, as the want of it before discouraged. When strength is gradually accumulated, encourage that most healthy and invigorating exercise, swimming, which is never followed by the ill effects so often seen in women from the overstraining of violent walking or horse back-riding.—*Philadelphia Medical Times.*

FISSURE OF THE RECTUM WITH CONSTIPATION.

A CLINICAL LECTURE.

By WM. GOODELL, M.D., Philadelphia, Pa.

(Reported expressly for the Southern Clinic.)

This woman complains of bearing down pains and menorrhagia at her monthly periods, and of excessive leucorrhœa between times. No examin-