

It is also of interest in the *ansæthesiæ* of hysterical subjects that we have, not only complete forms of anæsthesia, but may have incomplete forms, as, for instance, analgesia, or, loss of pain sensations only, or we may have only loss to heat, or electro anæsthesia, or alterations in the muscle sense. Tactile sense is the last to go, and never disappears alone.

Besides anæsthesia of the skin, we may have anæsthesia of the mucous membranes, or we may have hyperæsthesia taking the place of anæsthesia in the skin and mucous membranes. The bones and joints may also be involved in like manner. Another form of sensory disturbances which is sometimes very distressing is paresthesia.

A patient in my care at the present time attending the neurological out-door clinic of the Montreal General Hospital, whom I saw in consultation with Dr. Evans three months ago, received a severe shock from lightning during a thunder-storm. This was followed by insomnia, headache and marked nerve depression. Two weeks later, she began to complain of an abnormal feeling as if her face were all broken out with an eruption. The hands and feet, at times, had the same feeling. The mental impression was so strong, that if her casual glance happened to rest on her hands or feet, she became frightened at their abnormal appearance. When the feelings of discomfort in the face were troubling her, examination of herself in the looking glass would not convince her that the skin was normal. The patient's mother and sisters would tell her that there was no visible alteration to them in the extremities or face. This annoyed her very much. Two months ago she came under my care. At that time she had improved considerably in respect of her sleeping power, and other symptoms of the nervous break-down; still the discomfort in her face and extremities were as real as ever.

This patient, Miss T., is a bright, intelligent, active young woman, and in no way does she look the nervous invalid she is. After several conversations, I was able to partly convince her that her face and extremities were perfectly normal, and that she was suffering from a purely mental condition. At my suggestion she refrained from looking at herself in the mirror for over a month, and can now reasonably deduct and understand the cause of her discomfort. As a means of helping the condition, I have put her into the hypnotic state, and have suggested the disappearance of her trouble. Results have been very satisfactory.

In discussing the dissociation of the different sensations, pain, heat, cold, in connexion with the *anæthesiæ* of the hysterical subject, I would