

J. W. STIRLING, M.D.—The first few cases which were reported, occurred in elderly people, and it was thought that it must be associated with arcus senilis. The pathological changes are fatty degeneration of the substantia propria, such as occurs in arcus senilis, but in the disease under consideration the degeneration proceeds further, the tissue breaks down and undergoes absorption. Cases, however, have been reported in young people, in whom arcus senilis does not occur and hence all that can be said is that it is a similar condition to arcus senilis. As to a nervous cause being at the bottom of it, I am unaware of any proof of it.

A CASE DEMONSTRATING A METHOD OF TREATMENT FOR LUMBAR POTT'S DISEASE, WITH SHORT NOTES ON THIS METHOD.

A. MACKENZIE FORBES, M.D.

A. E. GARROW, M.D.—I would like to ask Dr. Forbes if the application of the bandage in this position is meant practically and entirely for the early stages, that is, before deformity and fixation. Otherwise, it seems to me a pretty trying position to force the child's spine into, if the case is anyway advanced. This position is one which is adapted for the treatment of early stages of lumbar disease. •

W. F. HAMILTON, M.D.—I would like to ask if the patient is so fixed that she can walk around and enjoy change, fresh air, etc., or if this position is for the complete rest in bed treatment. My experience with these cases is that they are only successful when complete rest in bed has been enjoined.

A. MACKENZIE FORBES, M.D.—In answer to Dr. Garrow's question. The child had had lumbar Pott's disease for from eighteen months to two years. As to the method, I may say that it is very much to be preferred for the early cases, though it is advantageous in the older cases as well.

This child has a marked deformity, which might easily have been seen had I arranged my jacket in the usual way, that is, by cutting a window over the deformity.

The method may be advantageous in sub-acute and chronic cases because, as we know, in the majority of cases of tuberculosis of the spine there is more fibrous repair than bony, and it is quite possible that if we can hold the spine in good position and allow time to elapse bone may fill in the space which is left by the disease.

I agree with Dr. Hamilton that general rest is essential in the treatment of tuberculosis of the spine. The trouble is that we cannot get this in all cases, especially with the poorer classes. I would suggest as the best treatment for patients suffering from spinal disease that they