

## PATHOLOGICAL SPECIMENS: ACUTE ANTERIOR POLIOMYELITIS.

C. K. RUSSEL, M.D., showed two specimens of the cord from patients dying of this condition, a report of which appears in this number of the Journal.

C. K. RUSSEL, M.D. I have not yet seen Dr. Spiller's report of these cases. It is merely from the specimens of these two cases that I came to the conclusion that the disease was far more widespread than was ordinarily supposed. The destruction is greatest in the anterior horns certainly, but spreads to the posterior horn as well, and even the surrounding white matter shows congestion and infiltration. Undoubtedly the cerebrum can be affected and we know it often is; we have seen the pons, too, and the medulla. I have had cases of facial paralysis in infants. I know that Dr. Shirres had similar ones, which are undoubtedly, I think, anterior poliomyelitis. We have another case at the hospital where there was paralysis of the motor fifth on both sides, the seventh on the left and the 12th or hypoglossal, besides his left arm had been paralysed and some of the neck muscles. I was very much interested to hear of this dog and I think it is not at all unlikely that it is the same condition; I know that when I was at Queen Square Hospital we had two or three cases of infantile paralysis in patients who had come from South Africa, and they reported an epidemic there which attacked dogs and other animals as well as human beings. To give some idea of the extent of the epidemic I may say that at the Royal Victoria Hospital we have coming up for treatment at the clinics every week twenty cases, and on the last Monday we had four new ones; they had occurred during August. It seems to me that the epidemic is receding at the present time, as it usually does in other reported epidemics; the greater number of cases have fallen in July and August. Referring to the cartilaginous flakes in the cord in the second case, I have also seen a great many, especially at the National Hospital at Queen Square, where the brain and cord were taken out in practically every case. It struck me that we saw this condition present there much more frequently than at other general hospitals where I have been, and it seemed to me that it is more common among patients who are suffering from nervous diseases. This would perhaps account for Dr. Shirres seeing it so often, being interested, as he is, especially in nervous diseases.

## SACRO-ILIAC STRAIN.

J. APPLETON NUTTER, M.D., read the paper of the evening, which appears on page 832 of this number of the Journal.

W. G. TURNER, M.D. It is with great interest that I have listened