## A CASE OF SPINAL TUMOUR.\*

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On July 9, 1900, there came to me Mrs. F., aged 63, complaining of incontinence and increased quantity of urine, weakness, swelling of feet, shortness of breath, lumbago, slight staggering, and burning sensation in the soles of the feet.

Her personal history is that of a well educated French woman who taught singing and the French language for years and who has recently managed two large clothing establishments. She thinks she escaped scarlet fever and diphtheria. Neither she nor her family give any history of syphilis, tuberculosis, rheumatism or neuropathy. She was married in middle life, never pregnant, and enjoyed good health until two years ago, when she nursed her husband through a long illness, which caused her most extreme fatigue and anxiety and ended in death from cancer of the neck.

Present illness dates from her husband's death, since when she has been weak and poorly. She gives no very definite account of the onset of symptoms, but her weakness, shortness of breath, and swelling of feet go back a year or two, while her incontinence, backache, feeling of heat in the feet and staggering, go back only several months. There has never been any difficulty in controlling the evacuation of the rectum. Lately she has been eating large quantities of fruit daily and excessive amounts of candy (chocolate creams, one pound a day).

Present Condition.—She is a well nourished woman of large frame, very pale in the face, lips and conjunctive of fair colour; muscles are very large and soft; fat is abundant; skin is smooth, warm and moist; tongue slightly coated; slight constipation, slight ædema of the feet and shins. Temperature 98 2-5° F.; pulse 80, small, regular, of moderate tension; respirations 20., quicken markedly on slight exertion. Lungs normal, no hydrothorax. Heart—abundant fat renders inspection, palpation and percussion unsatisfactory; no enlargement could be made out; there is no thrill; the sounds are feeble perhaps but clear and sharp cut, rhythm normal, no adventitious sounds. As the pulse is small, heart sounds weak, and ædema of the lower extremities and dyspnæa present, there is probably an inefficient myocardium. Digestion and appetite excellent, no stomach symptoms, no enlargement of liver, bowels slightly constipated. No enlargement of spleen or lymph nodes. Urine—pale,

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