ment in this respect, that he cannot hold up any weight before him at any distance from his body, as at arm's length. He cannot, for instance, lift grain on to a waggon, or pitch hay, without marked weakness referred to the area of the back above mentioned.

3. Present Condition.—Still unable to do any heavy or regular work. This has been the case now for eight months. Weight, 160 lbs. Average, 160-165 lbs. Most. 175 lbs. Pulse, 80. Temperature, 99 F. (at noon). Respiration, 18. Looks very strong and well, not anemic.

Digestive System—Normal.

Circulatory System-Normal.

Genito-Urinary System-Normal.

Nervous System—Brain and cranial nerves normal, never noted any subjective disturbance other than above mentioned. Motor functions, speech, eyes, and gait. all normal. Never any diplopia or sphincter trouble. Loss of power as above noted.

Erector spine muscles on left side normal, but on right, much wasted, fibrous, full of bare tendons, which could be rolled under the thumb much like catheters in a bag. Slight curvature of vertebral column to the left, involving the last two dorsal and first lumbar vertebræ, which were also slightly knuckled backwards, and with all those below them, standing out a little too plainly, partly from flattening of the muscular planes, especially or the right. The contour of the thorax was not disturbed, as the lateral deviation of the vertebral column was but slight.

Reflexes.—All normal, both cranial, arm, and leg reflexes, and cremasteric, except the umbilical and epigastric, which were normal on the left and entirely absent on the right side.

Diagnosis.—Toxic or infective neuritis of the three or four dorsal intercostal nerves on the right side, probably invading also the higher twigs of the lumbar plexus to the psoas.

Caries of the spine was excluded by family and personal history, mode of onset and progress of the case, and by absence of pain and tenderness to rough manipulation, jumping, etc., and to the hot sponge, as well as by the character of the curvature (lateral) and the shape of the slight kyphosis, and by the progress towards recovery.

Herpes Zoster may be mentioned, to be dismissed.

Anterior-poliomyelitis may, I think, be definitely excluded, for, amongst others, the following reasons: