

just as jumping off a pile of lumber would do. All these symptoms were promptly relieved by blistering the tender spines with liquor epispasticus. The condition was set up probably by a slight injury to the spine in jumping off a pile of lumber.

The following case is interesting, illustrating, as it does in a most marked manner, the phenomena accompanying tenderness, not only of the lumbar region, but also of the spine in general, and is the only well-defined case I have met with in which the whole spine was affected.

Mrs. W., aged 27, a lady of superior ability and liberal education. She never showed any symptoms of hysteria. From her childhood she has been delicate. After a severe illness, at the age of 13, she had much pain in the back for a couple of years, often being unable to sleep with a pillow under the head. Her back has troubled her more or less most of the time since. Six years ago she had an attack of severe pain throughout the whole spine. It began suddenly as she was dressing, on rising in the morning, first in the neck and spreading rapidly downwards. She was only able to throw herself on the bed, and for the next ten or twelve hours could not bear to be moved. Every movement, even the flexing of a finger gave her pain; deglutition was painful, but there was no interference with ordinary respiration, though a deep inspiration could not be taken. The whole spine was exquisitely tender, any pressure on it sending darting pains to the corresponding parts of the body. Temperature and pulse were normal; she was perfectly composed, and showed no symptoms of an hysterical character. By evening the symptoms abated gradually, but it was days before the head could be moved backwards and forwards without pain, and tenderness of a considerable portion of the spine persisted. She has since married, and been twice pregnant. In her first pregnancy the spinal symptoms disappeared, except slight tenderness in the mid-dorsal region, and her health was exceptionally good. Considerable debility followed parturition, and the spinal symptoms returned to about the same state as they were before pregnancy. They improved, but did not disappear, with improved health. During her second pregnancy last year she did not enjoy the good health of

the first. The spinal symptoms instead of disappearing, became aggravated in the lumbar region, with much pain at times about the pelvis. Walking was difficult, and any movement in bed always awakened her; the bladder irritable when pain was worst. Frequently the pain persisted, even during absolute rest, at times wholly preventing sleep; a good night's rest was the exception, not the rule. It was sometime before the true cause of this pain was discovered. The vagina was found to be tender on examination, as were also the whole pelvic contents, but the tenderness was evidently not due to inflammation, because it was not localized, nor was there any induration or thickening of any part. Temperature was normal. Examination of the lumbar part of the spine proved this to be the seat of trouble; it was tender, and pressure on it caused pain in all parts complained of as painful, especially the vulva. Galvanism was resorted to for relief, the positive electrode being placed over the upper part of the lumbar region, and the negative over the sacrum, so as to include the tender portion of the spine in the current; but the result was disappointing, the pain being made so much worse that no sleep was obtained for a night or two. Blistering seemed to have no effect. A spinal rubber bag, filled with hot water and applied, had a soothing effect, but on the whole, treatment of this case in any of its phases, was anything but satisfactory, so far as the spinal symptoms were concerned; the lumbar pain persisted till after confinement.

In another woman, in seventh month of pregnancy, whom I saw last week, there was rather severe pain in the hypogastrium, which proved, on examination, to be due to irritable spine; a small blister gave complete relief. In the case of another patient at present under treatment, in whom, among other things, the fundus of a retroflexed uterus, is very tender, there is great tenderness of the spinous processes of the third and fourth lumbar vertebræ, with shooting pains into both hips, in which there is also much pain, resembling sciatica, on walking.

The etiology of these three last cases is to be explained, I believe, on the theory of Quain, that in many cases the spinal pain and tenderness are transferred or transmitted phenomena connected with morbid states of the mucous