

measures in order to secure the best possible results. It is deplorable that these cases are so often regarded as incapable of improvement, the result being that the unfortunate patients usually drift into the hands of instrument makers whose ignorance of anatomy, physiology and pathology limits their therapeutic resources to the making of appliances which may be useful or quite otherwise. It requires knowledge and discrimination to decide which cases are best treated by mechanical means alone, and having determined that, what mechanical means will best accomplish the desired end. In a large proportion of cases disabled through anterior polio-



FIG. 7.

Result of the operation of tendon-transplantation in such a case as that shown in Fig. 6. Unfortunately this particular patient was not photographed before operation.

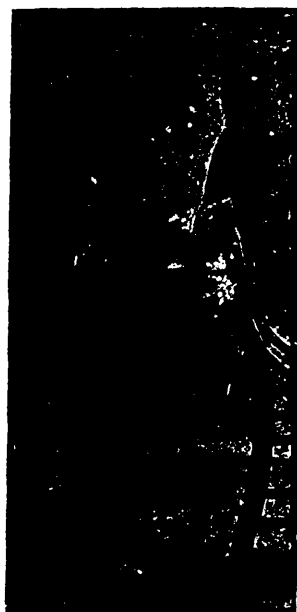


FIG. 8.

Severe infantile paralysis involving the gluteal muscles, depriving the patient of the power to hold the trunk erect upon the legs.

myelitis, the muscles affected are not entirely paralysed; some of the ganglion cells of the cord at the point from which the motor nerves arise have lived through the storm and serve to vivify, it may be only a few fibres going to the affected part. While the use of appliances may be unavoidable in many of these cases, we must never lose sight of the benefit to be gained by massage and carefully graduated exercise, especially the latter, so that through development the most may be made of such muscular fibres as retain their vitality. And the gain should by no means be limited to the increased power resulting from the strengthening of muscular fibres;