

assumed that the deformity was already established at the time when chondrification began and its origin is thus carried back to at least the fifth week and to a time when the mother would just begin to suspect that she had become pregnant, as her expected menstrual period would then be a week overdue. No visits to the zoo were yet thought of, as this was in midwinter, and yet the deformity was even then an accomplished fact which future development could not alter, but only make more clear and accentuated.

The deformed limbs will now be described in more details. In each arm (figs. 3 and 4) the shoulder and scapular regions appear normal, but slightly flattened, as though from pressure from the body lying on its side. The upper arm segment lies parallel to the long axis of the body, close in at the side, and appears flattened from side to side so that its mediolateral transverse diameter is only two-thirds that of the dorsoventral. It is gently tapering in outline, narrowing as the elbow is approached. The elbow is fairly well rounded, and from it the forearm runs forward in the same plane as the upper arm and flexed on it at an acute angle, being maintained in the position by a thick web of skin extending across the interval between arm and forearm. The part of the forearm beyond the attachment of the web is rounded, with its transverse diameters about equal, and tapers gradually distally. The carpus, metacarpus and the single digit also taper continuously distally, and are all in a position of partial flexion, showing marked creases or folds on the volar surface at the line of the joints. There is a well developed nail on the digit, but it does not yet reach to or project beyond the end of the finger, as is the case in a child born at full term.

The left forearm and hand (fig. 3) are in the same plane as the upper arm and in a position of complete pronation. The hand lies against the side of the cheek, the palm facing directly ventrally. Flexion in this hand is gradual.

The right forearm and hand (fig. 4) are in a position midway between pronation and supination, a position identical with that normally assumed when the limb skeleton is first defined (Lewis, Keibel and Mall's Human Embryology). The distal end of the