feeling in the feet, as if walking on springy rubber, and he also complains of coldness in the lower extremities, and tires readily on walking. There is no evidence of atrophy. The shooting pains are not constant and are worse at night. Ordinary sensation is lessened in both the feet and lower half of the legs in front and behind. Muscular sense is good. Patient says he has to steady himself to prevent falling when washing his face. On standing with the feet together and the eyes closed, he sways very much from side to side, but does not fall. There is considerable inco-ordination of the lower extremities in walking, the feet being thrown out and brought down with more force than normally. He has had much difficulty in attempting to walk in a straight line. The knee jerk is lost on both sides completely, even after reinforcement. There is no tremor of the lips, facial muscles or hands, and no inco-ordination in the upper extremities, or evidence of other trouble.

The examination of the larynx showed the vocal cords lying almost in apposition, or what may be styled the position of phonation. In expiration they appeared to be pushed apart, chiefly through a yielding of the right cord by the force of the breath, while in inspiration they sagged somewhat and came closer together. There was no lesion of the larynx, and the color was normal, sensation being somewhat diminished. The voice was hoarse and coarse, speech being free so long as the air in the lungs held out, when the patient paused and made a forced inspiration accompanied by a marked elevation of the shoulders. This exertion was painless but fatiguing. The facial expression indicated considerable anxiety.

Immediate operation was decided upon, and tracheotomy performed two days later, considerable difficulty being experienced with the anesthetic owing to the inspiratory effort. The incision was made below the isthmus of the thyroid. A tube has been worn constantly ever since (over four years) to the entire relief of the patient, who has had, however, several uncomfortable experiences owing to the tube having accidentally slipped out, the sinus showing at the same time a marked tendency to contract.

Coincident with the operation, that patient was put upon strychnia and arsenic, and a mixture of iodide of potash and mercury. Three weeks later the latter mixture was reduced owing to symptoms of salivation. The patient was kept in the hospital for over four months, during which time he gained considerably in weight and appearance, but complained of an increasing sensation of loss of power in the lower jaw. When he was discharged from the hospital he weighed 140 pounds. Examination made May 31st, 1902, by Professor Anderson.