

In the summer of 1906, she went through several months of severe moral and physical strain. Her physical condition was finally relieved by a successful operation for abortion, but the anxiety had been a great drain on her nervous system, and it was from this time that she steadily grew worse.

The pains in the calf of the right leg increased in severity, and then extended up to the hip. In the latter part of September, 1906, she began to attend the Out-Door Department of the Royal Victoria Hospital.

For the next three weeks she was under treatment, but the pain gradually became constant and so severe, as to finally make work impossible, and in October, 1906, she entered the Hospital. She received constant treatment throughout October and November, 1906, and was greatly relieved. In December, 1906, the spine was found to be deformed. She left the Hospital on January 7, 1907, her condition being about the same as at the time of this report.

Her condition, on admission to the Montreal General Hospital, on January 15th, 1907, was that of a well nourished intelligent girl of 22 years. The skin and mucous membranes were normal, the bowels regular, and menstrual periods normal. Weight was 128 lb., states she has lost 34 lb. in the last year. Heart and lungs are normal; also temperature, pulse, and respiration and the urine. When standing up a marked curvature of the spine was observed, the body was bent forwards and to the right. There was a great prominence of the left hip. The pelvis was tilted up on the left side. The weight of the body was carried mostly on the left leg which was straight, the right being flexed at the knee. Her walk was slow, careful and shuffling in character.

When getting up on the table for examination great difficulty was noticed. She lowered herself slowly till she reclined on the right side. Her actions all showed carefulness in guarding her back and left hip.

A dorsal decubitus was impossible owing to the prominent and and painful condition of the spine. The right leg could not be fully extended owing to the stiffness in the hip-joint with pain and fulness in the groin.

Examination of the spine showed a lateral and backward curvature to the right, most prominent in the lower dorsal region. There was no localised tenderness but a general hyperæsthesia over all the spinous processes.

The left hip showed a marked prominence accentuated by the back being bent to the right. The pelvis was tilted up to the left side.