With regard to the paralysis of the face, it should be remembered that in ordinary facial paralysis the person loses power over the palpebral muscle. In hemiplegia the eyelid can be closed, but not so in facial paralysis. When the eyelids are closed forcibly there is some weakness.

When the patient has recovered from the first stage, it will be noticed that the paralysis is not complete in the arm. The fingers, hand and wrist are more affected than the elbow and shoulder. On recovery the shoulder movements return before those of the hand.

In the lower extremity the foot suffers more than the leg, and the leg more than the thigh. The foot is last in regaining its movements, and the last movement of all to return is dorsiflexion of the foot. The recovery is rarely complete, and so some degeneration sets in along the lateral tract. There is late rigidity and increased knee jerk. So also are the periosteal and tendon reflexes of the wrist, elbow and shoulders.

In the toes, especially the big toe, there is a sign of great importance. When the lateral tracts are normal, if the finger nail be drawn along the sole of the foot, the toes are flexed upon the foot. If there is degeneration in the lateral tracts, the toes, and especially the big toe, is slowly extended upon the foot when the nail is drawn along the sole of the foot. This is a valuable means of distinguishing organic from functional paralysis.

When the hemiplegia is functional the face usually escapes. In hysteria the leg is usually more affected than the arm, which is contrary to the rule in organic paralysis. In true hemiplegia the leg is circumducted in attempts at walking, while in the hysterical form the leg is dragged like an inanimate object. In organic cases there is always a good deal of move-

ment about the big joints, shoulder and hip.

When the sensation is affected as well as motion, and the same parts are affected, there is frequently hemianopsia. This is a valuable sign of organic disease. In hysterical hemiplegia, there may be hemianesthesia, but then eye symptoms are crossed amblyopia, with blunting of touch, taste and smell. In the hysterical paralysis the muscle may be excited with the strongest currents and the patient not feel it. The loss of sensation is never so complete as this in organic hemiplegia.