

1st. Stiffness or muscular spasm. This is the earliest and most characteristic symptom in Potts' disease, and is usually very easily noticed in either the upper or lower regions which normally have considerable range of motion; but in the middle region it is more difficult to ascertain its presence, as this region has normally so little motion. Any loss of the natural elasticity of the body occurring in children should cause suspicion of Potts' disease.

2nd. Pain. This is usually present and may be confined to one side. It is reflected along the intercostal and abdominal nerves; it may be constant or occasional, and often causes night cry. In combination with a constrained stooping attitude and a grunting laboured respiration, it is one of the most characteristic symptoms of Potts' disease in the middle region.

3rd. Deformity in this region in the early stages resembles very much ordinary round shoulders, and great care is required in some cases in making a diagnosis. When the disease is more advanced, the projection of one or more vertebrae makes the matter plain.

4th. Paralysis. This occurs more frequently in disease of the middle region than elsewhere, owing to early implication of the cord which is here contained in a smaller canal. It is often a very early symptom, and may occur before there is any deformity. Paralysis thus induced is of the spastic variety; the reflexes are increased and the limbs are stiff, in this resembling cerebral paralysis, from which it may be diagnosed by the mental impairment which usually accompanies the cerebral form. In infantile spinal paralysis, the result of antero poliomyelitis, the reflexes are abolished and the limbs at first flaccid.

5th. Abscess occurs in many cases and may point in any direction, but usually follows the course of the Psoas muscle and points in the femoral region. Many mistakes are made in diagnosing. I fitted a woman a few weeks ago with a Taylor Brace for disease of the middle region, who had worn a truss for a year or more on the projection in the femoral region caused by a Psoas abscess.

6th. There are the General symptoms: the fever caused by the absorption of pus, the loss of appetite and weakness caused by the pain and irritation,

and the tickling cough and symptoms of asthma which often occur.

*Diagnosis.* - It is necessary in making a correct diagnosis to group all these symptoms together; especially is this true in the early stages of the disease when it is so important to the well-being of the patient and the prevention of deformity to commence suitable treatment.

Stiffness may occur in the posterior curve caused by rickets; there may also be considerable pain, but the presence of enlarged epiphyses and of beaded ribs will show the character of the disease.

The pain in Potts' disease is always reflected. There is no local tenderness on pressure or on making percussion over the diseased vertebrae. Cases sometimes occur where there is no pain.

When deformity is well marked it can be mistaken for nothing else, but in the earlier stages difficulties arise in diagnosis. In very young children it is not easy to feel the spinous processes; and again, there are normal projections occasionally seen in some persons—of the spines of the sixth and seventh cervical and of the first and last dorsal vertebrae. Great care has to be taken in these cases and it may be necessary to examine a case once or twice with an interval between.

Paralysis coming on in a suspicious case renders the diagnosis complete.

A few of the other affections which simulate Potts' disease are:

Strains of the back. These are uncommon in children but in adults often occur. These cases should be given complete rest for a few days when their nature will become apparent.

Lateral curvature of the spine is present in some cases of Potts' disease, but it does not usually occur until rather late in the disease when all the other symptoms are well marked.

Rickets has been mentioned already.

Wryneck, which complicates diagnosis in the upper region, causes no trouble in the middle region.

Hip-joint disease may sometimes be suspected, owing to the flexion of the thigh which occurs from Psoas irritation; but on examining the hip it will be found that motion is free in every direction except that of flexion. Pus from a Psoas abscess may burrow into the hip-joint and cause