

went out walking and to social gatherings, danced and drove about and would not confess to fatigue in doing so.

She was given different forms of iron, tonics without and with arsenic, strychnia, bismuth, pepsin, as well as many other combinations, stimulants &c. Laxatives, good diet and finally enforced rest in bed and quietness. Two months afterwards there was no improvement. There was now some vomiting or retching of mucus, but the most prominent symptom was complete anorexia and almost complete refusal of food of any kind so that it was a mystery how she existed. Emaciation was excessive, as much so as one far gone in phthisis, although there were no lung symptoms. Her pulse became very slow always under 60 and often 45. The temperature was habitually subnormal, hands always cold sometimes like one dead and her tongue was cold. In March 1893, she went to New York, residing with friends who took great care of her and placed her under the treatment of a well known physician there who gave her generous diet, and after three months she came back in very much the same condition as when she left here. She still would not allow that she was ill, but could perform her ordinary house and social duties, yet there was no change in the condition before described, her weight was now 90 lbs. only. Soon after this however there was a change of symptoms for the worse which compelled her to take to bed. She had fainting nauseating and suffocative feelings. Her pulse rose to 75, the urine was dark and scanty but no albumin nor sugar, although she now showed a craving for water. The temperature was subnormal circulation sluggish, and her hands dark red and cold. Emaciation more extreme if possible than before and had an appearance of great weariness and languor although she still asserted she did not feel so. She suffered from a severe bronchial attack coughing distressingly, and this con-

tinued for weeks till she seemed as if she would certainly die.

These more acute symptoms passed away again she picked up enough to get out although she would almost stagger in the street and was the subject of pitying remarks from passers by.

For sometime after this she resisted all treatment and practically was left alone and merely existed.

Then she went to Boston where she stayed some months, coming home again with the belief and statement from the physician that she was suffering from advanced consumption and would soon die. She was however only having another bronchial attack, and although miserably ill she lived through that. She now began to eat some and gradually gained some strength, so that she was able to get about.

Her condition since, is that of slight improvement so that she has resumed her social engagements and house duties displaying considerable activity. This has also been brought about by her determined will to be active causing her to engage in some employment that absorbed her attention from herself. She is still extremely emaciated and menstruation has not appeared.

During a large part of this time and history her domestic relations were much disturbed, but during the early part of it, that is while the diseased condition developed, these relations were of the happiest nature and any disturbance of them took place long after this disease existed and could not have caused the inception of it, yet no doubt it was aggravated by such disturbances.

In this case the apparent symptoms were those of functional gastric disorder, for except the amenorrhoea there was no symptoms indicating any other organ than the stomach at fault.

The prominent points were from the first, and through the whole course of the disease—complete loss of appetite and inability to take food which at first was rejected if forced into the