

use will cause the hands to be dropped to the sides, and if a number of patients be allowed to work together and to vie with each other as to the length of time during which the swinging is maintained, they will manifest considerable interest and amusement. Relaxation of the muscles, as complete as possible, should be encouraged so that the full force of suspension may come upon the ligaments situated toward the concavity of the curvature. The employment of straps passing under the shoulders or of the hands to aid in suspension or swinging while suspended by the hands entirely, must fail in exerting nearly so great a stretching force upon the deformed spine because the latissimus dorsi passes direct from the shoulder to the pelvis and would largely bear the weight of the pelvis and legs thus preventing the extensile force otherwise exerted directly upon the spine (fig. 2).

While thus suspended a further corrective force may be employed by the application of power acting at right angles to the line of suspension and at the point of greatest curvature, which will also be at the point of greatest rotation (fig. 3).

While these means are being employed the corrective force may be increased by fastening heavy weights to the feet, ranging from thirty to fifty pounds. Care should be taken to cause the lateral force to act in the direction of the oblique diameter of the thorax, that is, not one passing directly from behind forward nor directly from one side of the body to a corresponding point at the other. If it act direct from behind and forward there will be some loss of power in making correction of the lateral deviation. If it act in a direct transverse diameter the force will tend to cause still greater bending of the ribs and will increase rotation of the spine.

Many other methods have been devised for exerting a direct corrective force, but I have never seen any which can exert so great an influence unless employed while the patient was anesthetised. The means above employed can be so arranged as to be entirely under the control of the patient, who may cease from suspension as soon as her endurance reaches the limit. The force may be increased from day to day, indefinitely, and, being subject to the patient's adjustment, may be repeated several times every day and continued from fifteen to thirty minutes each time. Having employed this means for fourteen years, I have never known it to cause injury to any patient.

In recommending this treatment I assume that a correct diagnosis has been made and, further, that the patient be not allowed to adjust the apparatus until she has been thoroughly instructed and has become well acquainted with the manner of using it.

In fig. 4 is shown another method of employing force, not so effective as the former and yet acting powerfully, especially in connection