

the vertebra, and still more on that one which has diminished bony elasticity.

Most cases of Pott's disease no matter what level, give the history of pain for a prolonged period, and the pain is of the character of a dull ache. On exertion, especially stooping forward, the patient has increase of pain and complaint of weakness and stiffness in the back or neck. This last symptom is the result of the rigidity of the vertebral column and gives rise to the characteristic attitude assumed by these patients in picking up an article from the floor. The patient will frequently diagnose his case as rheumatism, and try to work off the stiffness, which naturally causes increase of pain. Inability to do usual work, avoidance of driving or riding in street cars will be early noted; and these patients will volunteer the information that when jolted, in the sitting posture, they steady themselves by lifting their own weight with their arms, and will seek to rest the back by placing their elbows on the arms of the chair.

In Pott's disease, therefore, affecting the body of the vertebra, pain is an early and very important symptom. In addition, tenderness, especially over the spinous process of the affected vertebra, and some tenderness also over the process above and below, is to be elicited. If the collapse of the vertebral body, in the destructive process, is not symmetrical the column is inclined to one side or another,—scoliosis, and where this is the result of the disease, there is frequently pressure on one of the nerves at its exit from the foramen.

Another method in which direct pressure on the nerve may be brought about is by disease affecting the articular facets or some lateral portion of the vertebra. The thickened tissue, whether granulation, abscess, or breaking down material, will cause a typical pressure neuritis. The patient frequently complains of pain at the peripheral distribution of the nerve, and when the part is examined anaesthesia with a boundary zone of hyperaesthesia may be noted. In searching for the cause repeated questioning may bring to light certain complaints such as "stiff neck," "clumsy gait," or "lazy nature"; the complaint of pain in the back may be nil.

Illustrating such a condition, I would call attention to a radiogram of the cervical vertebrae of a woman aged 60 years, who had been treated for a long time for neuritis over the shoulder. The cause is really a tubercular lesion involving the articular facets on the left side between the 4th and 5th cervical vertebrae. In this case there was definite neuritis, stiff neck and increase of pain when actively moving about. These last two signs should have given warning to examine for Pott's disease.