

of the symptoms of this disease, and pointed out that there are a large number of instances in which typical symptoms of caries do not exist.

PAIN, for instance, is a very uncertain symptom. I need not refer to the peculiarities of pain in an ordinary case, as they will be well known to all surgeons having experience of this subject; but I would again call attention to cases in which pain is either very slight or entirely absent. I have known caries to progress to a very considerable amount of deformity, and even abscesses to form without any pain occurring.

I have recorded several such cases, and therefore I will not dwell longer upon this point.

HIGH TEMPERATURE is a very important symptom, and is of especial value in cases where the diagnosis is, as far as other signs are concerned, doubtful. In acute tubercular caries there is very often, but not always, a rise in temperature. The following case well illustrates this subject:

Miss E. H., a very delicate-looking girl aged 16, began to suffer severe pain in the lumbar region, in April, 1893, and had gradually got worse.

When I first saw her, August 9th, she had recently recovered from influenza, but the temperature had risen again to  $102^{\circ}$  in the morning and  $103^{\circ}$  in the evening. It had been so for the previous fourteen days.

There was at first a question as to some specific fever. I found projection of the twelfth dorsal and the first lumbar vertebrae, and great pain in that region and below it. The spine was very rigid.

The case was obviously one of caries, and I thought that the high temperature was the effect of tubercular disease. Dr. Seton, who had charge of the case, coincided with my opinion. I anticipated a lowering of the temperature as soon as the spine was thoroughly fixed. The chart of this case is very interesting. The day following the

application of the "adjustable metal splint," the appliance which you have seen used with such good effect at this Hospital, the temperature dropped from  $102^{\circ}$  and  $103^{\circ}$ , which it had been for eighteen days, to  $2^{\circ}$  lower in the morning, and to  $1^{\circ}$  lower in the evening, gradually decreasing during the succeeding days. After each fresh adjustment there was a small temporary improvement in the temperature, but after the drop of the first four days it remained practically the same for nearly six weeks, when a further improvement took place, after which the temperature remained very steady, a fraction above the normal, and a week later it became perfectly normal, and has remained so. At the date when this practically normal temperature was attained, I had just succeeded in so arranging the apparatus that it proved a perfect support in all postures of the body. The spine had been gradually subsiding to a position in which it now remained fixed; the patient had been also improving in every other way—in healthy appearance, in gradual lessening of pain, and having a better appetite. The patient's listlessness and disinclination to do anything for herself, and some other symptoms, had led the relations to consider that some at least of her symptoms were hysterical. This view I could not agree with, and the hysterical symptoms all disappeared with the disappearance of the high temperature and with the other improvements.

This seems a very characteristic case of active tuberculosis of the spine; but from treatment by local fixation, and with general medicinal and dietetic remedies the patient continues to improve, and there seems every probability of a cure being effected.

The temperature should be regularly taken in all cases of caries. I have found it a valuable diagnostic symptom; a slight rise perhaps of about one degree of temperature only—often being present in caries