

last, and at the end of three months she was able to walk unaided except by her braces and crutches. In order to afford her an opportunity to place one foot before the other, as in walking, her weight was suspended by straps under the chin and occiput, attached by a rope to a car running on a trolley line about five feet above her head. In this way her entire weight could be sustained, allowing only sufficient downward pressure to enable her to feel her feet upon the floor. A rope passing on either side of her, parallel with the trolley line, at such a height that she could conveniently place her hands upon the rope, she drew herself repeatedly across the gymnasium and learned gradually to place each foot before its fellow, alternately, as in walking. After a few weeks' practice in this manner she was given crutches, and at the same time braces were applied extending from her boots to the perineum, so adjusted that the knees were prevented from bending while she was in the upright position. The amount of suspension power was now gradually lessened, permitting more and more of her weight to come upon the feet and crutches. Gradually she acquired more and more ability to move forward by these aids, until within the three months she had learned to balance and to make progress without the aid of the trolley suspension. Throughout this period of training other means, also, such as massage, were employed. When I stated above that she was unable to move either limb while lying upon her bed, I meant explicitly what the words express, and that condition still persists. Notwithstanding this fact, when in the erect position, and her weight suspended almost entirely from the trolley line referred to, she learned in some way to make muscular effort sufficient to carry the limbs alternately, one before the other, as in walking. I cannot tell the exact muscle combinations by which this was accomplished, but practical efficiency has gradually improved until she has learned to walk with a fair degree of ease, aided only by the braces and crutches referred to. This may seem to be a small accomplishment, but when one considers that in regard to motility this was a case of complete paraplegia, and that this woman will be henceforth independent of the aid of any person in her efforts to move about, the benefit is certainly very great, and could not have been obtained without the aid of the physical education which has been given since September last.

Another illustration. A patient who from any cause permits the arch of the foot to drop down below the normal limit and allows the foot to roll into a position of pronation, may have the attention so directed to the use of the muscles which hold the arch in a normal position and have the habit of holding it in this corrected position so confirmed by practice as to overcome the deformity, hold the foot in its normal attitude and obviate the