

there was a quarter of an inch atrophy of the right thigh, and that it was impossible to swear to spasm of the erector spinae.

The child was put in a plaster spica, and 4 months after the first examination the plaster was removed because the child was soiling it, and a further examination and measurements were made. This showed that the left anterior superior spine was held at a slightly lower level than the right, indicating probably scoliosis. Measurements of both extremities were the same. There was no flexion, and no adduction. The patient was kept in bed. On December 31st Dr. Shaw was written to and on this date it was stated that the diagnosis had always been in doubt, that a lumbar Pott's disease, a tuberculous lesion of the hip, and an infective arthritis of that joint had all been discussed, and that as the child was now apparently well, it seemed most probable that we had been dealing with an infective arthritis.

On January 16, 1907, four months from this first appearance, another note was taken. This note is interesting. These are the words:—
"Right psoas contraction: slight rigidity of the lumbar spine: *glands enlarged in both groins*: slight flexion of the right thigh: no adductor spasm. The question of diagnosis had to be again considered.

On November 27, 1907, child was again brought for examination, not having been seen since March of that year. The note states:—
"The mother says that this child was discharged at her request on the 2nd of March last. The diagnosis was always in question, it being considered lumbar Pott's, but it was impossible to verify this tentative diagnosis. The child is brought back to-day with a prominence of the second lumbar vertebra, muscular spasm being apparent, the diagnosis of lumbar Pott's disease being verified."

The preceding is the first case which I wish to discuss. Its history, as looked at to-day in the light of our present knowledge, is not so very confusing. I think if that little patient were brought to us to-day that we would realize from the beginning that she was suffering from lumbar Pott's disease, and not from anything else, but, although we strongly suspected it, when she was brought to us, and on subsequent examinations, we never could be certain, and kept vacillating in our diagnosis between lumbar Pott's disease, tuberculosis of the hip, and infective arthritis.

There is one point of special interest to me in this history, and it is that at the time of making these examinations I knew nothing of the significance of an involvement of the lymphatic glands, and did not look for such involvement, yet the history distinctly records that these were involved. One thing was not done which to-day we always do