

A WRY-NECKED FAMILY.

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THE illustration represents two brothers and two sisters suffering from torticollis. The cases are numbered from left to right and arranged in order of severity. Each was born apparently healthy, but in after-life symptoms of torticollis developed. There is nothing in the family history that suggests any probable cause of the condition.

CASE 1.—The patient began to walk when she was three years of age. She had torticollis in childhood, but does not know the date of its commencement. When fourteen years of age she had chorea, but there is no history of rheumatism. After this date the torticollis became more marked. As regards her present condition there is well-marked torticollis. The right shoulder is pulled up. There are tonic contractions of all the muscles of the left side of the neck and frequent jerking contractions of the erector spinæ

than on the corresponding side. There is no paralysis or loss of sensation. His general condition is good.

CASE 3.—The patient's general health has always been good. About ten weeks ago he noticed a sensation of "pulling" in the right side of his neck. This symptom rapidly increased in severity until his head was strongly pulled down towards his right shoulder, rotated to the left, and extended so that his face looked upwards and to the left. He now speaks very slowly, but says he has always done so. The right shoulder is slightly pulled up. The right sterno-cleido-mastoid, the upper border of the trapezius, and the levator anguli scapulæ are affected; these muscles are slightly hypertrophied. If the sterno-mastoid be taken between the finger and thumb slight but frequent tonic contractions can be felt.

CASE 4.—The patient is a healthy, good-looking girl eighteen years of age. She states that for a few months she has been troubled with involuntary movements of her head backwards and to the right. At first the movements were very slight and occurred at long intervals, but lately they had been stronger and more frequent, and now she notices that her head is slightly pulled to the left when she is thinking of something else, but she can always keep it straight by an effort of the will. The head is at present slightly rotated to



muscles. The muscles of the right side of the neck are hypertrophied and are much larger than those of the affected side. There are jerking choreiform movements of the muscles of the face and great difficulty in speaking and swallowing. The limbs are also markedly affected. When spoken to all the contractions become exaggerated. Slight movements occur during sleep. Otherwise the patient is in good general health.

CASE 2.—The patient in this case is a strong-looking man, thirty-six years of age. He never had anything the matter with him until four years ago, when he was troubled with twitching of the muscles of the face and running from the eyes; later he had pains in the muscles of his back and at times his head was jerked backwards. Six months after this he noticed that his head was pulled to one side. The contractions were worse in damp weather; at times he had a difficulty in speaking. At the present time the left shoulder is markedly pulled up, and the head is pulled backwards and rotated to the right. There are no convulsive movements, but if the affected sterno mastoid be taken between the finger and thumb slight tonic contractions can be felt. The sterno-mastoid and trapezius on the affected side are smaller

the left and approximated to the right shoulder. On examining the neck the right sterno-mastoid is slightly more prominent than the corresponding one. There are no other symptoms of importance.

I have been unable to find any other account of torticollis affecting a family in the manner described above. Ross in his "Diseases of the Nervous System" states that "the relatives of those suffering from wry-neck are not unfrequently subject to hysteria and nervous affections." What the cause of this peculiar family affliction may be it is difficult to say. I think one may put out of consideration the possibility of coincidence. There is no evidence of there being any hereditary pre-disposition to the disease, but it is not impossible that heredity may have something to do with the condition. It is known that one child may by mimicry acquire choreiform movements from another affected with chorea, but it is difficult to conceive that torticollis would be acquired in the same way. However, the most important question is, Can anything be done to relieve this unfortunate family? So far as one can see very little can be done, and I will not venture to suggest any method of treatment.

Bolton.