

By adolescence cross-dressing is usually well established but is devoid of fetishistic meaning, since feminine dress evokes not excitement but a feeling of well-being, serenity, and happiness. Extreme revulsion for their genitalia and all signs of masculinity often results in persistent importuning for surgical "correction," and in some cases self-castration may be attempted.^{2 3} In schizophrenia bizarre self-castration may occur with or without delusional ideas about change of sex, but in the transsexualist there is no other evidence of the schizophrenic process.¹ By the time he reaches a hospital clinic the transsexualist has usually adopted feminine garb in public; facial hair is reduced and the testes are small and atrophic owing to self-medication with stilboestrol, which the patient often denies.⁹ Many authors comment on the exceptional intelligence, versatility, and artistic gifts of these patients.^{2 13} Though usually anxious to assert their feminine normality, many of the patients present frank neurotic features.¹ On most psychological tests they show high scores for feminine interest, but their conviction that they have an attractive feminine physique is sometimes in ludicrous contrast to their hirsute muscularity. The sincerity and conviction with which these people describe their predicament has inclined many physicians who have studied the disorder to regard transsexualism as an inborn tendency, but the men patients show no chromosomal abnormality and in every possible measure are anatomically and physiologically male.¹ However, there is an excess of abnormal sexual behaviour among patients with Klinefelter's syndrome and in association with certain disturbances of brain function. About one-third of that amount is used in industry, mostly in photographic manufacture, and a large proportion of that in the manufacture of x-ray film. About one-third of that amount is used in industry, mostly in photographic manufacture, and a large proportion of that in the manufacture of x-ray film. Sacro-iliitis, with its radiological signs of erosion, sclerosis, and fusion of the joint surfaces, is sometimes encountered in the absence of any other abnormality; it is sometimes associated with ankylosing spondylitis ; and it is sometimes found in those other conditions whose relation with one another and with ankylosing spondylitis is incompletely understood—namely, psoriatic arthritis, Reiter's disease, and the arthropathy accompanying ulcerative colitis^{5 6} and Crohn's disease. One of them had severe recurrent pain and tenderness localized to the left sacro-iliac joint and responding promptly to colchicine.