

Towards evening the somnolence inclined to coma, which was occasionally interrupted by a loud outcry, and convulsive movements, the hands and feet thrown backward, and considerable struggling. The child on these occasions seemed to be in a state of terror or dread of something. Respiration became embarrassed with what appeared to be a collection of mucus in the throat. The patient inclined to vomit. At the suggestion of the parents, and with a view to dislodge worms if they should be present, a mild emetic was given, but nothing was vomited except the ingesta and a quantity of frothy sputa. The respiration became more and more obstructed, the coma more profound, and deglutition impossible. Pulse, as nearly as could be determined 192—and nearly imperceptible. The handle of a teaspoon was introduced into the mouth and a quantity of frothy sputa disgorged, and, at the same time, it was ascertained that there was no tonsillitis or diphtheritic exudation present. There were slight contractions of the muscles of the right side of the face; eyelids but partially closed, and eyeballs turned up so that a zone of cornea was constantly visible; marked oscillation of the eyeballs. These conditions continued throughout the next twenty-four hours; death occurring on Sabbath morning about six o'clock. There were no petechial spots on the body that I observed during the illness, but after death there was considerable discoloration of the cervical region and lower extremities. Opisthotonos was not well pronounced, but the tendency in that direction was somewhat notable. I regret that I could not get the thermometric indications for want of an accurate instrument, nor was an analysis of the urine made. No *post-mortem* examination was allowed. I could not make out any history of hereditary phthisis, but the scrofulous diathesis was sufficiently evident in the child. An unprofessional observer remarked that he thought him "consumptive." The child had been ill last year, with what trouble does not appear, the family having recently come to reside in this locality. The diagnosis made and concurred in by a medical gentleman who was called in consultation (but who thought the case at first rather obscure) was irritation of the meninges of the cervical portion of the spinal cord, and base of the brain either from tubercular deposit, or from the *materies morbosæ* which obtains in the disease, known as cerebro-spinal meningitis. There has been no epidemic or other sporadic cases of cerebro-spinal meningitis in this vicinity. I may add that the treatment