The condition of the patient became rapidly worse, and on March 9th he could not protrude his tongue beyond the teeth, could not close his eyes or whistle, and could not raise himself in the bed. 10th all movements were painful and performed with great difficulty and the patient was so weak that he could not raise his head from the bed, while the diaphragm showed signs of paralysis—the intercostals remaining Tenderness of muscles, especially those of the face, was extreme, the slightest touch being painful. Later in the day dyspnosa became marked and the patient could not clear his throat of the mucus which accummulated. His face was utterly expressionless and he could not move a muscle. Next morning he appeared to be rather better and by March 14th he could breathe comfortably, although still unable to close his eyes, raise his upper lip, or wrinkle his forehead. time on he improved steadily and by April 4th was able to sit up in a chair. On April 18th he was discharged, feeling well and able to walk a considerable distance, although there was still slight tenderness of the muscles on deep pressure and the knee-jerks had not returned.

When presented before the society the man was in good health, and the reflexes had returned to their normal condition. The etiological factor was doubtless syphilis, and the improvement was rapid when mercurial inunctions were commenced.

The second case was that of a Hebrew merchant, aet 37, who was admitted to the hospital on Sept. 23rd 1901, complaining of pain in the back, weakness of extremities and paralysis of the lips. On Sept. 15th he was perfectly well and in fact was able to deliver a lecture, during the course of which he became intensely excited. On the following day he was exposed to the cold and wet, and on waking next morning noticed some numbness and weakness of the lower extremities. This weakness increased so rapidly that by the afternoon he was unable to walk.

By September 21st he had become so weak that he could not move a limb, or even turn in bed without assistance, his lips also were paralysed and he suffered such intense pain in the legs that he was unable to sleep. On admission nothing abnormal was found in the heart, lungs, glandular system, or blood, while special chemical and physiological tests of the urine by Dr. Bruere revealed nothing; however his mouth was very foul, the gums being ulcerated and teeth covered with sordes. His family and personal history proved to be good, with nothing indicating any toxic origin of the trouble. Further examination showed that he was unable to sit, stand, or walk, but could raise his legs a little off the bed. There was a marked facial paralysis, the patient being unable to show his teeth, close his eyes, or wrinkle his forehead, although he could partially protrude the tongue. There was no objective sensory