

phate, with their terminal edges bevelled off into facets. Mucus corpuscles were in abundance. A solution of pernitrate of iron produced a heavy precipitate of the phosphates. I am aware of the seeming contradiction of uric acid being precipitated in urine with these characters, especially when its natural solvents, the alkaline phosphates, are in such excess; but the chlorhydric acid test corroborated an anomaly which I do not pretend to explain.

Clancey was ordered, by Dr. F. W. Campbell, to have oxide of zinc ointment applied to the parts irritated by the dribbling of the acrid urine; and to take the $\frac{1}{20}$ th of a grain of strychnine, and three grains of iodide of potassium three times a day.

December 12th. To-day the patient was admitted to the Montreal General Hospital at the request of Dr. Campbell, and placed under the care of Dr. McCallum.

The flexor muscles of the thigh have regained much of their power, and the vastus internus in the right thigh has quite recovered its integrity; but the muscles of the legs and feet are still completely paralysed. Bed-sores have formed over the sacrum, but they are yielding to lead-plaster and the Edinburgh red wash.

Sensation is improving, *pari passu*, in both legs. Evacuations can be procured, only at long intervals, by soap enemata aided by croton oil. The urine remains unaltered up to date. The strychnia has been reduced to grain $\frac{1}{30}$ th three times a day. There has been a great deal of pain in the left leg, which is more wasted than the right; both ancles are œdematous, and very painful spasms in the paralysed muscles are now of frequent occurrence. General health has suffered but little.

Feb. 1st., 1864. Motion has *slightly* and sensation *decidedly* improved, but there is no power over any of the muscles below the knee in either leg. Patient can detect the pressure of

2 points at 3 inches distance on the right fibular region.

" " " $2\frac{1}{2}$ " " " " left " "

" " " 3 " " " " right outer thigh.

" " " $1\frac{1}{2}$ " " " " " inner "

" " " $1\frac{1}{2}$ " " " " left thigh { both sides
the same.

Electric contractility and excito-motor action, are annihilated in both legs. Patient is slowly emaciating, and both legs are wasting. The patient was removed in May to his residence, where he continues in much the same state.

Cause. The injury may be ascribed to the probable rupture of some