symptoms from the first, and persistent for several days. The cojunctive were injected, presenting a peculiar reddish appearance.

The skin, during the first week, was dry and harsh, afterward, occasional perspirations of a very profuse character occurred. The tongue was comparatively clean and moist, pulse 112, full but weak, respirations 16. I saw him upon the 5th day of the attack in consultation-and several times subsequently. I found him lying upon his abdomen with his head drawn back upon the neck with neidir of the muscles of the trunk. He lay constantly in this position, the least attempt at alteration not only being uncomfortable, but appear ing to give him positive pain. This position was singular and was persistent throughout nearly the whole of his illness. It is not the position in which patients are prone to lie in this disorder, being generally upon the back, or frequently the right side. It is so exceptional that Dr. Gordon, who witnessed a very large number of cases which occurred in the Irish Epidemic a few years ago, noticed it in one case only. He says, " the patient, a girl, lay on her abdomen and refused to allow herself to be moved on her back or on either side Her spine presented a most wonderful uniform curve concave back wards, her head was also curved backwards on the spine of her neck."

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The boy's pulse was 1.20 per minute, weak and thready, and respirations 17. There was no delirium and no coma, but he lay in a sort of semi-torpid condition with a hesitation in answering que tions and a manifest wish to be let alone. The tongue presented m marked abnormal appearance at any time, and in the cases which I have seen, it forms no guide whatever in forming either a diagnosis or prognosis, being generally tolerably clean and moist until the approach of death. Urine normal in appearance and kidneys acting well, howels have a tendency to constipation. The tetanoid pheno mena were well marked and persistent in this case from the first tonic contraction of the muscles of the neck and back, retracting the head firmly backwards, as in opisthotonos. The pulse varied at di ferent periods of the day without any alteration in position from te to twenty or even thirty beats. The temperature in this case was not noted, but as the disease progressed it showed a well marked remittent type, there being exacerbations of fever and increased pair observable generally in the afternoon, and in the course of a fortnight sometimes a remission in the symptoms of two or three days dur