sometimes able to prevent attacks by pressing on the nerves of the arm with his right hand. Tried a great many remedies, surgical and medical, but in vain. Parsons applied an apparatus to patient's neck, which was designed to draw off "an excessive quantity of electric matter from the brain," through a blister in the back of the neck. A silver plate was placed over the latter, over that a wet sponge, and these were connected by a wire with a second blister on the knee. The raw surface on the knee was covered by a zinc plate, also attached to a wet sponge. Both the sores and plates were dressed daily.

Not a single attack of epilepsy occurred for two years after the use of this ingenious mechanism.

Blisters and the Cautery.—The use of the actual cautery to the nape of the neck and spine is recommended by W. A. Hammond and McLane Hamilton, but Brown-Sequard holds that cures may be also brought about by circular blistering or cauterization with a red-hot iron of a limb or even a toe or finger—just as a ligature about a limb may abort an epileptic attack preceded by an aura beginning in the limb aforesaid.

A case in which the patient was cured by the application of the cautery to the larynx is reported by H. Green. (13) Another by Recamier (14) is as follows:

A tailor, aged 32, was admitted to the Hotel Dieu (Paris) on account of epilepsy. Had a onesided aura and numbness in his left foot. Was variously treated without effect, but finally blisters were applied not only to the affected foot but to those parts affected by the warning aura. He left the Hospital, after having had several dozens of blisters applied, much better, and for three months, as long as he was kept under observation, he was quite free from the attacks.

Burns.—Whether it is the shock to the nervous system, the counter-irritation produced by the suppurating surface or a combination of both, it is difficult to say, but it is well known that cures of epilepsy have been brought about by burns. instance of this is recorded by R. Beveridge.

Case 7. An epileptic fell into the fire and received a deep burn of the face. Before the would

healed, portions of the nasal, ethmoid and frontal bones came away. After a tedious convalescence the fits did not return.

Sproule, (16) Bouygues, (17) Reese (M.), (18) Pearson, (19) Langewicz (20) and many others have published similar cases.

Amputations.—Unless it be the result of a shock to the cerebral centers or the outcome of a lasting mental impression, it is difficult to see how amputation of limbs that have no discoverable connection with the disease, can cure epilepsy, and yet there is a number of recorded cases. Among the earliest of these are two by Aubanel. (21)

Case S. B., æt. 40, a member of a family which never suffered from epilepsy had, while serving in the Spanish war and without apparent cause, became an epileptic. Typical attacks came on every two or three weeks, and finally became so frequent that he was unable to attend to his duty. After several years' of misery he fell into an open fire one day and was dreadfully burned-so badly indeed that he was obliged to have his left arm amputated near the shoulder. Since the day of the operation he had but one slight fit. Had been free of them for a year, and at the date of the report had improved in all respects.

Aubanel's second instance is the following:

Cuse 9. Mmle. Fleury, of healthy parents and aged 50, became at the time of her first menstruation and without apparent cause, the subject of fits. At first they came on every five or six days, but at last they became so frequent that she had them very often and daily. The seizures were typically epileptic, and set in without an aura. She remained in this wretched state until her 25th year, when she fell into the fire and badly burned her right hand. This accident had little or no effect upon the epileptic attacks. The wound never completely cicatrized, and there continued to be a watery discharge from it. She injured the hand again, the scar burst open, cellulitis set in and the limb became so affected that an amputation was done. Previous to the operation her mental condition was pitiable; she was barely able to look after herself and could hardly speak. The operation seemed to change all this. The wound healed nicely, the fits did not return, and her general health as well as her intellectual powers, gradually returned.

Medical Gazette, iv., p. 98, 1853.
Bullètin de Therapie, Janv., 1844.
Medical Times and Gazette, 1868, vol. i., page 390.

^{16.} London Medical Times, 1844, page 152.

^{17.} Journal de Medicine et Chir. de Thoulouse, 1852, p. 44.

^{18.} Phil. Med. and Surg. Reporter, 1869, 239.

Ibid, 1869, 145.

Oester, Med. Wochenschrift, Wien, 1846.

^{21.} Gazette Medicale de Paris, M. 43, 1839.