

During the day he had some twenty spasms, but none of them sufficiently strong to produce opisthotonus.

November 2nd.—Spasms quite frequently, but for the most part light. Temperature, $100\frac{2}{3}$; pulse, 116; respiration, 42. Between spasms is drowsy and sleepy. Urine, per catheter.

November 3rd.—Slightly delirious. Temperature, $102\frac{2}{3}$; pulse, 146; respirations, 48. Muscles become at times quite flaccid. Spasms unfrequent, but severe. 9 a.m.—Temperature, $105\frac{2}{3}$; pulse, 150; respirations, 46. Given cold pack. He cries out at times, but spasms are rare and very slight. 4 p.m.—Temperature, $104\frac{2}{3}$. 6 p.m.—Temperature, $104\frac{2}{3}$; pulse, 160; respiration, 38. Has been unable to swallow all day, and is unconscious; cannot retain enemata. Spasms are about gone. Bowels have been freely acted upon throughout. Spasms controlled by chloral and bromides. Death comatose, with implication of respiratory and cardiac centres. No post-mortem. Urine examined, but nothing abnormal discovered.

Dr. MEYERS related a case of tetanus following confinement, in which the spasms began in the leg, and in the course of half an hour attacked all the muscles of the body. The patient was kept under the influence of chloroform for two or three days until the attacks almost ceased. The sight of one eye was completely lost, and the pupil became dilated and has remained so.

Dr. BAINES asked as to the habitat of the bacillus, and referred to Dr. FOTHERINGHAM, who said that Prof. Ramsay Wright had found the bacillus in earth taken from the ravine near the University building. He related a case: Two men were splitting rails in a swamp. One, while holding a wedge, received a blow on the end of his finger, without, however, breaking the skin. Tetanus supervened and death ensued.

Dr. ATHERTON said that he had seen five cases—one following labor. All the patients died. In the first there was a wound in the heel, the second of the leg, the third of the forehead, the fourth of a crush of the elbow.

Dr. CASSIDY believed tetanus was a rare disease in Canada. It was common in France, especially among veterinary surgeons, blacksmiths, and people whose work brought them in contact with horses.

Dr. STRANGE said the last case of tetanus he had seen was in the keeper of a livery stable. Under the influence of chloroform he was quieted, and recovery followed.

Dr. THISTLE said that tetanus was common in cases of labor. Sometimes the child suffered from inoculation through the cord. The germ has been found in every country in Europe. It is only absent