

is proportionately distressed. His body and limbs have become quite warm. Heart weaker. He is very restless, and says he is going to die. Dr. Reddy ordered O'Berne's tube to be passed up the large bowel to draw off flatus, with a view to relieve the breathing. At 5:30 P. M., O'Berne's tube had been in an hour, considerable amount of flatus and some feculent matter had escaped. The breathing, however, was not much relieved. Dr. Reddy then passed a very fine acupuncture needle into the colon above the cæcum; a little flatus escaped; then into the centre of the transverse portion, when a little more escaped; then into small intestines, when jets of air escaped for a short time. The man asked to be raised in bed, when the needles were withdrawn, and then a considerable quantity of flatus came up the œsophagus. Notwithstanding all these measures, the action of the diaphragm is nearly stopped from the distention, and asphyxia seems most threatening.

*16th, Morning.*—Condition much same. The distention of bowels steadily increasing. Temp., 90.4-5; pulse, 48. Brandy was increased to 4 oz. Towards evening his temperature was below 90.2-5. About 10 o'clock P. M., he asked the nurse for a drink, and then to be turned on his side. In about five minutes, when the nurse returned to see how he was, she found him dead. He died quietly, and was sensible to the last.

*17th. Autopsy.*—Seventeen hours after death, weather moderately warm. Cadaveric rigidity well marked. Face livid; body not discolored; both pupils dilated; left one most so; no bed sores.

Resting on the rect. ant. majores there was a considerable quantity of dark clotted blood in the cellular tissue. About the seat of injury there was extensive extravasation of blood. There was dislocation between the bodies of the 6th and 7th cervical vertebræ, the 6th projecting forwards in front of the 7th about half an inch. The ligamentum nuchæ, inter-spinous ligament, ligamenta subflava, and post common ligament, were all ruptured, and on the right