In order to this I will give you the history of the case.

D. M'C—, farmer, aet. 63, admitted to Hospital, October 22, 1881. Born in Scotland, present abode Orillia, County of Simcoe. Is a single man. The family history is good. No hereditary predisposition to disease. Patient has used stimulants moderately, tobacco very immoderately.

Previous Diseases or Injuries.—Some twentyfive years ago the patient sprained his back in the lumbar region, has never done hard work Has been troubled by indigestion and general weakness for last twenty years. two years ago got stung by "poison ivy" in the head, considerable swelling over the left side and vertex resulting. This swelling slowly disappeared in the course of six weeks without treatment. During the summer he was in the habit of sleeping on a bedstead too short for him, and on waking in the morning would occasionally find his head sore from pressure. Also, the cellar ceiling was low and he occasionally struck his head thereon. Was often exposed to the possibility of syphilitic contagion, but denies ever having had syphilis.

Present Disease.—In July, 1881, after working one day in the hot sun, felt as though he experienced a slight sunstroke. Two weeks afterwards severe pains, originating in the lower occipital region, and shooting to the vertex, troubled him a good deal. These gradually increased in severity, and were always aggravated by change of position. Afterwards was troubled with twitching of the arms. Appetite became very poor, and after suffering in this way for some weeks swelling appeared on the head, when he came to the hospital.

State on Admission.—Complained much of stiffness of neck and swelling of the glands, and it was for this chiefly that he sought medical advice at the hospital. Upon examining the head it was found swellen and boggy over the vertex; complained of little or no pain in the scalp at this time. The tumefaction was such as to lead to the conviction that disease of the bone or periosteum was present.

Respiration, quiet; pulse, 80; temperature, normal; digestion, fair; bowels rather consti-

pated. Treatment: two long incisions were made, one along the vertex over the parietal region; one over the upper part of the occipital. Free hemorrhage occurred; the bones were found denuded of periosteum and necrosed, a probe could be passed to the dura mater.

Syr. Ferri Iodidi administered, and poultices applied to the openings, secured in place by a capelline bandage.

Nov. 15.—One of the incisions was enlarged. At this time the cavity over the vertex was large, portions of necrosed bone could be picked off by the finger, a considerable surface of dura mater can be seen; the pulsations of the brain are plainly visible.

December 6th.—Eyes examined. Patient says his sight has been failing very much for past two years. An opacity of left cornea is present. Pupils dilatable, but extremely contracted. Opacity of media prevents thorough ophthalmoscopic examination, but a large hamorrhagic patch is seen in left fundus.

December 10.—Microscopic examination was to-day made for evidences of malignancy, with negative results.

Now, gentlemen, we must endeavour to find the cause of this death of bone; for it is only by finding the cause in such cases as this that we can be sure of treating them properly. The state of matters you see before you may have been produced in various ways,—the various causes requiring entirely different lines of treatment; therefore the question becomes of paramount importance to the patient,—can we, by the most careful study of the history and condition of this man, unravel the difficulties which seem to surround the case? for a casual examination will throw little light upon it; the case is an obscure one, and demands our closest examination.

The condition which is here present might be the result of several causes which I will enumerate.

First,—It may be due to some form of carcinoma. In favour of this supposition we have several points: the age of the patient; the extensive destruction of bone, and the enlargement of the glands of the neck, all give a probability to the idea. But none of these circumstances is to be held as pointing absolutely to