

might depend on the presence of the animal, a dose of castor oil and turpentine was ordered; he spat it in the face of the attendant; since his admission he has steadily refused food and medicine.

January 30th. Slept none, is less noisy, when he leaves his bed, he falls, the left arm and leg being paralysed; he took some milk during the night, but refuses nourishment in any other shape, is constantly picking the bed clothes. Face uneasy and suspicious, skin moist. Pulse 108. Thermometer cannot be used he is so violent.

January 31st. Sleepless last night, pulse 72 soft. Tongue covered with greyish fur, bowels have been very costive since admission; to have a rhubarb draught with 3 ij Tinct Capsici added; he appeared to relish a small quantity of the beef tea, brandy and egg mixture J. M. was taking. At the evening visit H. P. was found much weaker. Voice indistinct and low delirium present, the aperient had not acted. Two doses of Pulv. Capsici gr. XXX each were ordered to be given him before night in the beef tea and brandy mixture.

February 1st. Slept a great part of last night, was asleep at the morning visit, bowels well cleared. Ate a good dinner but still rambles in speech.

February 2nd. Improving in every respect.

February 3rd. Had a slight return of the raving; mended steadily to February 6th, on which day he was marked for discharge; while waiting in hospital during the day he had an attack of partial paralysis of fingers of left hand and of left leg, the fingers being semiflexed with muscular twitchings, and the muscles of back of leg attacked with cramp, an intelligent orderly remarked that the cramps were like those he had seen in cholera.

H. P., manner at the time was strange, with wild expression of countenance, temperature 100.

February 7. The cramps have altogether ceased, he is quite rational, and he continued to improve and was discharged to duty on February, 10.

REMARKS.—From the results following the capsicum treatment in the above cases, I should certainly be disposed to try its effects again, the previous habits as well as the complications existing in each case afforded a presumption that the delirium tremens would be severe. Dr. Girdwood late of the Grenadier Guards saw these cases on the 31st January with my colleague Dr. Thompson, 100th Regt, and I am sure they will pronounce them typical cases of delirium tremens.

As we were of opinion that opium was contraindicated in both instances, in J. M.'s case from the tendency to cerebral congestion due to