become unconscious. One morning, about two years afterwards, he had a similar attack just after getting out of bed. A friend who happened to be present said that he lay on his back for about a minute and then looked around with a vacant stare. Patient states that he has had, off and on, perhaps twice a month, milder attacks of dizziness and buzzing in the head, but in these he never became unconscious. They usually came on after exertion or just after rising in the morning.

If he stoops over at his work he becomes dizzy and also gets a

pain in the region of the heart.

About a year ago he first noticed the itching. This commenced in the hands. About two weeks later his legs and feet became itchy. The itching left his hands, feet and legs and went to his trunk. He says that he became "raw" in spots and that he can show marks where his skin was excoriated. During the last few months there have been no marks on the skin; but the itching has continued, particularly in the head and pubic region. He believes that insects in his skin are the cause of the itching, and that he can find "thousands of them on his head and scrotum."

## PRESENT CONDITION.

Psychic State.—Patient has a very high and narrow palate, of the gothic type. He has a peculiar way of looking when telling one of his complaints. He seems to look past or above one. Orientation as regard time, place, person and date is intact. Memory is good. He has marked derangements of perception; delusion, illusions, and probably hallucinations. Patient states that there are thousands of insects in his skin. He describes them and says there are three varieties—red, white and black—some being very small, others as large as a house-fly. Inspection of the skin does not give any sign of the presence of animal parasites, but one cannot convince him that they are not present. The delusion is fixed. He takes particles of dirt, scales, etc., for insects. On one occasion he showed me a dead spider, which he had picked up in the bathroom, as an insect from his skin.

## PHYSICAL EXAMINATION OF CIRCULATORY SYSTEM.

Inspection.—When the patient is lying down the external jugular veins become engorged and slightly pulsate. They do not fill from below. The pulsations appear to be more frequent than the radial pulse. The apical impulse is visible, as is also a pulsa-