never downwards. If that be so, then it is evident degeneration takes the direction of the functional activity of nerve fibres. These grand facts, springing from the study of a nerve cicatrix to a nerve—then from a nerve to the spinal cord—then from the cord to the medulla oblongata and white brain substance, have given us an insight into conditions the microscope could not divulge alone. These morbid changes show, on the one hand, the close intimacy of all nerve fibres; and on the other, the radical distinction of nerve tracts. Nerve fibres seem to lie along side of one another like insulated electric wires, yet quite distinct from one another in function, until some point of *consensus* is reached in a nerve center.

It will be seen then that a good deal of attention has been given lately to the connection nerve influence has upon nutrition. It is asserted that certain parts of nerve centers have more peculiarly the functions of ennervating actions, which convey distinctive energies to focal points of assimilation. It is evident from recent examination that there exist these so-called "trophic centers." These spots of peculiar nerve movement and influence are rich with the multipolar ganglionic cells. Our anatomical knowledge teaches us that these regions thus endowed are in the fourth layer of the cerebral cortex, in the anterior cornea and in the posterior columns of the spinal cord. Prolongations from these minute cells also affect nutrition. This great fact is strikingly illustrated in irritation of the fifth nerve. It is followed by skin eruption, ulceration of the cornea and inflammation of the eye. In paraplegia with wasting of muscles, we find its cause where the multipolar cells most abound in the anterior cornea of the spinal cord. Progressive muscular atrophy has the same record, and an analogous condition exists in