

The products of septic inflammation within the circulation causing the severe systemic disturbance.

Septic emboli were carried to the lungs, setting up pneumonia, the last and fatal link in the pathological chain.

The high vacillating temperatures without diurnal or nocturnal abnormal regularity, with almost daily rigor, profuse sweating, and relaxation of the bowels indicated severe systemic disturbance of a pyemic nature. The sudden onset and rapid course of the illness occurring in one having a chronic otorrhœa, with the above symptoms fully developed, not having a low temperature, a slow pulse, tardy cerebration, no impairment of sensation or special sense, no optic neuritis, or prepillary disturbances, was against abscess, or, at least, a large one.

Yet, to offset this, McEwen says that in inflammatory lesions of the temporo sphenoidal lobe there are seldom any localizing symptoms unless the abscess be of large size.

The sigmoid sinus was not opened at the same time as the mastoid cells were, because of the finding of pus in them, the evacuation of which and their cleansing, and the application of iodoform and boracic acid powder might give relief without resorting to a most formidable operation.

There was also the uncertainty of finding the sigmoid sinus occluded, as the mastoid vein which empties into it, and is considered a valuable guide, was not occluded.

Trephining over the temporo-sphenoidal lobe was done as a *dernier ressort*, in hope of finding a foci of pyemic infection, as this is the most likely point for an abscess in such cases, though the indications did not particularly favor it.

Had the sigmoid sinus been opened, which in itself is an operation beset with many dangers and difficulties, it is doubtful if the result would have been otherwise, as the sigmoid sinus, at the post-mortem, showed incomplete thrombosis without occlusion, and an extensive disintegrating purulent clot, which it would have been extremely difficult or impossible to have removed.

**DANGERS OF KOLA.**—Kola has been taken up, says *Pharm. Products*, by people who would never enslave themselves to rum or opium, because it is announced as a stimulant without reaction. That is the sheerest nonsense. There must be reaction from the exhilaration of any stimulant. The first effect of kola is hardly noticeable; the man who takes it simply feels refreshed, but after eight or ten hours the heart's action is increased enormously; then, later, in the habitual kola drinker or eater, there is the lassitude, the nervous weakness and the tremulousness that ensue from over-drinking; the difference is that with kola the reaction comes on more gradually. The wise bicyclist will let kola in all its forms severely alone. It is in the insidiousness of the drug that the danger lies. It does away with the fatigue that a long bicycle ride brings, but before long it comes to be relied upon, when the development of the slavery is easy. The important point for the public to bear in mind is that kola is not harmless, but must be used with the same caution as opium or morphine.