

this carnification and lobular pneumonia, have only been ascertained within comparatively recent date (1844-49). It was found by experiments on dogs, that any obstruction in the bronchial tubes produced after a time the appearance of apneumatosiis in the distal lobules. The resemblance between these cases and those of children affected with apneumatosiis, due to bronchial secretions obstructing the air passages, was soon recognized. Whether produced from either source the lung tissue would sink in water; be non-crepitant on pressure; have the same physical appearance; and could be inflated to resemble the normal lung.

Bronchitis produces this condition somewhat in the following manner: If the calibre of a tube be nearly filled at one point by a plug of mucus, the effect of inspiration propelling it toward the air cells will be to completely close the tube, when it arrives at a part of the calibre of which is less than that which it originally occupied. The plug of mucus will thus act as a ball-valve, and at every expiration a portion of air will be expelled, which, if inspiration is not replaced, in the end, the lobule to which the bronchus in question leads contains no air at all, and the condition to which it is reduced is one of apneumatosiis (Reynold's System of Medicine vol. 2, page 310). Expiration being much more powerful than inspiration, must also materially aid the expulsion of the air. The form of death that takes place is that of slow asphyxia.

My object is not to produce a resume of what is known of this affection, but to report a case that has proved fatal in an adult.

On the 7th of January last I was called to see the late Dr. A. G. Jackes who was suffering with bronchitis. He attributed his attack to the damp and cold atmosphere, to which he was exposed, while attending service in Holy Trinity Church, on New Year's day. On returning home, a distinct chill was experienced, and within four days the unmistakable symptoms of acute bronchitis manifested themselves. At my first visit the temperature was 103 2-5° Fah.; pulse 112 full and regular; respiration 60 and

labored; cough distressing, but not frequent; expectoration scanty and sputa viscid; the bowels and kidneys doing their work well; the expression anxious; and sleep could only be secured in snatches while sitting in an easy chair, and his head resting on a support in front. Nothing out of usual line of progress in such cases developed for a considerable time, other than the persistent high temperature; the complete inability to sleep or rest in bed; and that the attack was protracted.

Of the antipyretics employed antifebrin was found to be the most efficient, and suitable as much as ten grains every four and six hours were taken to advantage without manifesting the slightest depression of the heart.

The improvement was considerable on the 20th and the night of the 22nd refreshing sleep was had in bed, for the first time since the invasion. His condition on the 23rd was so good as to warrant the opinion, that recovery was undoubted. The temperature was normal and the bronchial tubes were almost clear. The next morning I left the city on a two weeks trip to the south. In four or five days, however, great dyspnoea, sinking sensations, and other serious symptoms developed, then Doctors Higginson and Blanchard were summoned. Evidently renewed bronchial secretions obstructed the tubes of the right lung, and it was feared that apneumatosiis was supervening, which proved to be only too true. The vesicular murmur was lost on the right side except over a narrow strip extending from the nipple to the scapula; there was hyper-resonance on percussion; the temperature normal; general cyanosis very marked; pulse variable; oedema of the feet and legs rapidly coming on; intense restlessness and sleep impossible.

On the 4th of Feb. I returned, to find my patient in the above described, distressing and hopeless state. As was expected, he gradually became worse, till the 8th, when slow suffocation and exhaustion ended the scene, consciousness remaining to the last.

Other than ministering to his comforts and mitigating his sufferings, we could do little. Repeated hypodermic injections of