

## SOME POST-MORTEM NOTES.

IN the course of post-mortem investigations one not infrequently comes across conditions which are both interesting and instructive. One here learns how life can accommodate itself to markedly changed conditions of its tissues or organs, more particularly if such a process of change be a slow one; and again one learns how little may suffice to terminate life. One finds, too, that it is not always possible by a post-mortem examination to clear up the cause of death and this, too, with the aid of microscopical, chemical and bacteriological processes.

It might, then, prove of some interest to cite a few notes from cases met with on the post-mortem table these past three years.

Amongst these notes I find three cases of injury to skull and brain, which are of some interest; two from the position of the accompanying haemorrhage; the third a gunshot wound, from the course of the bullet.

Case I., Post-mortem, Dec. 4th, 1895. This was the case of a man aged 35 years, who fell from a waggon while drunk, lighting upon the hinder end of the left parietal bone, over the parietal eminence, and dying 24 hours later, there being a serous discharge from right ear. At the point of contact there was a gash or, rather, a mass of pulped tissue about  $\frac{3}{4}$  inch in diameter, the center of this spot being  $1\frac{1}{2}$  inches outside mid line and  $1\frac{1}{4}$  inches in front of lambdoid suture. A fracture line passed from an inch anterior to this backward and inward to the external occipital protuberance, thence opening up right limb of lambdoid suture, the parieto-mastoid, and then passed forward into squamous bone to a point just anterior to line of meatus. The petro-occipital suture was also opened up into the lateral sinus making at the same time a small opening through the dura mater. There was no extradural haemorrhage except a small clot—thimbleful—just under gash on left parietal bone. The right hemisphere of the cerebrum was found covered with from  $\frac{1}{2}$  to  $\frac{3}{4}$  inch of clot, most marked in the dependent portions. A thin sheeting was found about the cerebellum and the left middle fossa. The fracture, or opening of sutures, was thus mainly on the side opposite to which the blow was struck and was