

effect. The patient being still unconscious was supported by nutrient enemata. Twenty-four hours after the accident the left lung showed a dullness over the base, and in 80 hours from admission the patient died.

At the autopsy, performed by Dr. Macphail, the scalp tissues were found infiltrated in the region of the wounds, all of which were well healed. The skull cap showed a separation along the line of the squamous suture, more marked upon the left side, but no definite fracture could be demonstrated. The dura mater was adherent, and on either side of the longitudinal sinus, over the brain, was a thin layer of dark clotted blood. The brain, on the right side, in the posterior part of the temporal lobe, had a small diffuse hemorrhage. The base of the skull was not involved and no damage to the cord or vertebra was observed.

Upon making an incision in the median line, from the chin downwards, a wide extravasation of blood was observed over the larynx and upper part of the sternum which extended to all the tissue at the root of the neck and deeply into the apex of the lungs.

When the sternum was removed it was found that the manubrium was separated from the gladiolus along the line of union, and the thyroid cartilages were divided along their anterior borders. The anterior mediastinum was filled with blood, which manifested itself in the lungs as a broncho-pneumonia. The left base of the lung was consolidated.

It would appear that the squamous sutures were separated by the impact driving down the parietal bones upon the temporal, that the larynx was rent asunder by the chin compressing it against the vertebral column, and the sternum was fractured by the indirect force transmitted through the chin.

This case is interesting as revealing very clearly the mechanical effects of injury.

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