

The teeth were covered with sordes; anorexia was marked; the bowels were regular. The abdomen was slightly prominent below the level of the umbilicus. There was no rigidity; general tenderness was present. The percussion note was tympanitic throughout. The spleen was doubtfully palpable. The liver was not palpable and dulness was normal in extent. The skin was hot and dry. Numerous rose-spots were present upon the abdomen. The muscles were small and flabby. The lymphatic glands were not palpable. The intelligence and memory were good; there was no headache; the patellar reflexes were increased. Menstruation began at 14 years of age and was normal. On June 7th, 14 days from the onset of the first symptoms, a hæmorrhagic area made its appearance near the umbilicus following the application of an ice-bag. There was distinct ecchymosis of the skin of a dark purple colour which did not disappear on pressure. On the 20th the abdomen was still distended but less tender. On the 29th the patch on the abdomen was fading. During the night the patient had two intestinal hæmorrhages and multiple hæmorrhages were present over the left half of the trunk posteriorly. On the 30th, during the night, there were profuse epistaxis and hæmorrhage from the lips and gums and effusion of blood into the conjunctivæ, and during the day there was hæmaturia. A blood count gave 13,000 leucocytes. Widal's reaction was present. On July 1st subconjunctival hæmorrhages of the right eye had partially disappeared, but now there was hæmorrhage below the right lower eyelid. The urine still contained blood, but there was no vaginal bleeding. There were a few subcutaneous hæmorrhages upon the trunk. During the night there were epistaxis and hæmorrhages from the back of the throat. On the 2nd ten ounces of saline solution were injected below the mammæ. A few subcutaneous hæmorrhages appeared upon the lower limbs. The patient was much weaker. A blood count gave 1,540,000 erythrocytes and hæmoglobin 35 per cent. On the 3rd the patient did not sleep and became gradually weaker and died at 8.40 A.M. The treatment adopted was as follows. Cold baths, 18 in all, were given until the hæmorrhagic tendency developed. Spirit of turpentine and liquor calcis chloridi were given internally; applications of suprarenal powder in glycerine were made to bleeding mucous surfaces.

This case may be described as one of typhoid fever of moderate severity occurring in a young person in previously good condition. The course was typical except that the disease set in with a chill and the spleen was at no time