

semeiological arrangement. On the 6th day; afterwards cessations of pulsation, copious. ex- ing 60 beats a the rest of the On the 7th sion, and sig- nity of articu- this fit, hemi- the patient all the pre- latter till 70

hemiplegia after closure and this vessel this peculiar these vessels ly every an- referred to The history asated blood, Out of 14 blance to it. ent was at- gular respira- dissolution. upervened. by Macau- ing 12 cases mation can otoms under ecedents of and in others

ne ordinary al faculties, t of excre orile distur

bance: but a more singular event than these, was an intercurrent stupor and vigillium. This remarkable alternation was noticed during the last three weeks of existence. The stupor was associated with signs of weakened volition, sensation, and apparently great exhaustion. It generally lasted for 36 or 48 hours, was always connected with costiveness, and usually passed away after a free evacuation of the intestinal canal. A sort of reaction then occurred, the patient became wakeful, power and feeling returned, this continued so for about 3 days during which the appetite would be good, he would sit up in bed, talk and enter anxiously upon personal matters. It was observed that with each relapse into drowsiness, the symptoms of paraplegia became more marked, as if the drowsiness were attended with periodical exacerbations of the central lesion. And again as the recoveries became repeated, the last, in order, exhibited greater signs of sympathetic disturbance than its predecessor, thirst became more urgent, the desire for food lessened, the pulse lowered in strength, &c.

XIV. The cerebral lesions to be expected after ligature of the carotid are of a two-fold kind, those from 1st. inanition, and 2nd. overstimulation. The hemisphere corresponding to the occluded artery is anæmic, whilst the opposite one is over-vigorous; upon the first there is a deficient, while upon the second there is an increased pressure, from the altered degree of fulness of the blood vessels. The effects proceeding from both these conditions are sometimes only temporary, because they are soon remedied by a new or compensatory arrangement of the circulation. At other times, however, serious changes of structure are gradually established, and a sure foundation is laid for permanent disorder. The morbid states hitherto recorded have been congestion, simple inflammation, atrophy, and softening. The case described stands alone, in presenting a new cerebral lesion—abscesses—after carotid deligation. I am not aware of any reported case in which a similar result is described. Indeed, it is so far different, from what is usual, that some might believe the abscesses were not consequent upon the ligature, and that their occurrence in the right hemisphere was a mere coincidence. They were not bordered by softening and had all the characters of chronicity. For anything that appeared to the contrary, their origin may have been before the day of the operation. Like many other cases of encephalic suppuration, there was a remarkable immunity from the ordinary symptoms of phrenitis; a truth which is sometimes so forcibly declared, that not a single symptom of head derangement exists although pus in large quantity is present all the while. The alteration in form and size of the thalamus opticus, and corpus striatum are interesting, and a few years ago, when the connexion between these parts and the extremities was