

moderate form, she was still insensible with the pupils sluggish, and inclined to remain dilated. The pulse was 140, small and very weak.

"Ten grains of calomel with two drops of croton oil were administered, and a tablespoonful of hot brandy punch given every ten minutes.

"When a few doses of the brandy had been given, the pulse increased in volume and strength, though its frequency was not diminished. The spasms returned every ten or fifteen minutes continuing for nearly an equal length of time. With a view of arresting them altogether, she was made to inhale a small quantity of chloroform, which seemed to operate favourably, arresting the spasms almost immediately, and tranquillizing the whole system.

"An hour having elapsed from the time of the administration of the calomel and croton oil without the bowels having been moved,—two additional drops of croton oil were given on a piece of sugar, and the brandy steadily continued.

"The convulsions soon ceased altogether, but symptoms of extreme exhaustion set in. The pulse became weaker and weaker, the face was pale and the surface of the body cold. The pupils were neither contracted nor dilated. As a sort of *dernier resort* 5i of solution of morphia was given, but without producing any alteration in the symptoms, and about 5½ o'clock while preparations were being made to administer a turpentine enema, she quietly expired."

NECROPSY.—*External Surface.*—Skin and conjunctiva deeply stained with bile pigment; mammary and abdominal signs of pregnancy evident; integumental fat of a light orange color.

Head. Section of the scalp only gave exit to a very small quantity of blood; pericranium of a yellowish shade; calvarium similarly stained; detachment not impeded by morbid adhesions; removal of brain not accompanied by any unusual flow of blood; meninges invaded by the jaundiced hue; sinuses not gorged; brain not congested, veins rather empty than full; no effusion of serum or exudation of lymph upon the surface or base; consistence of neurine firm, grey substance not preternaturally vascular; fewer puncta vasculosa in the centra ovalia than are ordinarily observed, white substance faintly obscured by a light buff tint, which is more mottled than uniform; entire absence of fluid in the different ventricles, including the fifth; vascularity of choroid plexus not increased; vena corporis striati of both sides empty; no extravasation of blood in any part.

Chest. Costal cartilages bilious; both lungs normal; heart healthy, with the exception of trivial hypertrophy of left ventricle; more or less