

quently troubled with gravel," for which she used to take sweet spirits of nitre; she would, moreover, at times complain of a fullness in the head, with great pain referable to the parietal region, and this was followed by more or less stupor and inability to comprehend (for the time being) what had been said to her; at other times slight emesis would succeed these head symptoms; she would, on such occasions, remain in bed for one, two or, perhaps, three days, and return to her avocations in apparently excellent health; her appetite was very good, but she suffered considerably from indigestion and constipation, frequently going for three, four or five days without having a stool. In stature she was large and broad-chested, with neck proportionately large, but not unnaturally short; she was fifty-four years of age. In my opinion, she was rather of the phlegmatic than plethoric habit.

At my first examination I found the pulse soft, slow, and compressible—beating at 58; face pale and natural; pupils contracted, with the eyeballs fixed; there was also considerable emesis, of the appearance and consistence of coffee grounds, and she had micturated and defecated involuntarily. I regret to say that I was unable to obtain her urine. At this stage I failed to perceive any evidence of paralysis. Finding the patient in this critical condition I called Dr. Roddick in consultation, who promptly responded to my request. Before Dr. Roddick arrived she had a convulsive attack which lasted a few seconds, and was followed, for some time, by an increase in the heart's action; the pulse now being full and bounding; the face presented no alteration in colour, neither did it exhibit any marked evidence of paralysis (the spasmodic contractions of the muscles being symmetrical), and the pupils were now contracted to about the size of a pin's head; there was no strabismus; spasmodic action of the diaphragm, evidenced by hiccough, continued for some time after the attack, or rather until gastric irritation was relieved by vomiting. Now, for the first time, the respiration became stertorous and remained so for a few minutes, when, gradually losing its pitch, it became much hurried. I now found the pulse beating 60; respirations, 32; the pulse-respiration ratio being thus considerably disturbed. The temperature, which was, of course, increased with the circulation, now became much lowered, and a clammy sweat bedewed her body. I deemed it advisable to administer a stimulant, and ordered 1 ounce brandy, which she swallowed quite readily, thus showing no impairment in the power of deglutition.

Shortly after this Dr. Roddick arrived. Hearing from her friends of her rheumatic history, we carefully examined her heart, but found nothing to indicate an abnormal condition of that organ.