

is a rare symptom of phthisis in children, it is a frequent one in pulmonary gangrene. MM. Barthez et Rilliet (1) noted it in four out of sixteen examples of the disease.

6. Gangrene of the lungs is said to be a more frequent affection than sloughing of the walls of a tuberculous abscess. That accurate observer, Laennec, says that it is "at least ten times more frequent."

7. The healthy condition of the right lung. The most careful examination failed to detect any evidence of disease in the right lung, while a cavity and adjacent alterations were clearly established in the left. Now, it is the result of experience that tuberculous disease seldom—very seldom—reaches an advanced stage in one lung, without some traces of a similar disease being present in the other. The same rule does not apply to gangrene; hence a strong argument (when taken in connection with others) in favour of Doyle's being an example of gangrene.

8. The circumstance that the base of the lung is the chief seat of the disease, and that the disease has attained a more advanced stage there than in the apex, points strongly to gangrene, which very frequently begins in the lower lobes, whereas the habitat of tubercles is almost invariably the apex; so much is this the case, that when the tubercular deposit occupies both situations, it is almost always most advanced in the latter.

9. Lastly, Doyle's sallow, wan, and greasy unhealthy appearance is peculiar and reminds one of the "wan and leaden" complexion assigned by Laennec to the subjects of this disease; it is very different from that usually witnessed in phthisical patients.

Let us now discuss the

*Arguments which may be urged against our Patient's Ailment being that of Pulmonary Gangrene.*

1. His illness after the wetting not having been as severe as might be expected in so serious a disease as gangrene. Bear in mind, however, that his illness did oblige him to lie down at the end of a week, although being of very active habits he resisted as long as possible, and that his symptoms grew progressively worse for eight weeks. Moreover, that gangrene of the lungs, especially when circumscribed, is sometimes very insidious, is admitted by most writers since the fact was mentioned by Laennec; and one of the latest original contributors to this subject, Dr. Silverberg, remarks that "pulmonary gangrene may begin with the signs of an affection presenting little danger; it is only in a few cases that its true nature can be recognized immediately after its commencement."

(1) *Traité Clinique et Pratique des Maladies des Enfants*, t. 2 p. 411.

(1) *Brit. and For. Med. Chir. Rev.*; No. 36, p. 251.