

Simultaneously, almost, with the subsidence of the pain in, and redness of the limb, the skin became bathed with perspiration of a strongly urinous smell and taste; respiration, at the same time, became labored; the face assumed a deep yellow, cadaverous appearance; and, on the day following, (Thursday) numerous small, white specks appeared on the face, and uncovered portions of the neck and hands. On Saturday, the skin upon the forehead and face was as rough to the feel as sandpaper. I desired him not to allow the face to be washed, and, on Monday, large transparent cuboid crystals, many of them more than two lines in diameter, were thickly clustered on the exposed parts of the face and neck. About eighteen of the larger crystals were scraped off for further examination. So soon as the existence of urine in the circulation became evident, diaphoretics were prescribed; and, on the soporific effects of the poison manifesting themselves, Squill, digitalis, and nitre were substituted, combined with stimulants.

On the following day (Tuesday) I was joined by Dr. Campbell in consultation. The skin still presented the same speckled appearance, though the larger crystals had been washed away; breathing was less labored than before; all the external senses still unimpaired; pulse 110, weak and compressible; bladder not distended. Scheidam schnapps were substituted for the champagne he had been taking; and vin. seminis colchici added to the diuretic mixture.

Monday, 9 a. m.—Found patient reading the morning papers; had slept well, and felt "better"; felt his wrist—no pulsation in the radial artery; heart acting feebly; coldness of extremities. 10½ a. m., symptoms same as at nine; breathing very labored; perspiration profuse; intellect quite clear when loudly spoken to, and correct answers given to questions asked, but quickly relapsing into semi-unconsciousness. The coldness of the extremities continued to increase till 2 p. m., when a short convulsive twitch closed the scene.

At 3 p. m. next day, I made a *sectio cadaveris*, at which Dr. Campbell assisted. The right kidney presented many diseased features. It was considerably elongated and redder than that of health, corresponding to the 2nd form of enlargement described by Rokitsansky, which the translator, from a paucity of words, terms "congestive turgor." The kidney was very soft and flabby, resembling, not a little, in color and consistence, coagulated blood, partially organized.

The lining membrane of the pelvis and calices was covered with hemorrhagic spots of ecchymosis, of from two to six lines in area.

The ureters were large, but their lining membrane was of a natural pale color.