

sion. The case (with this exception) presented no other special points of interest. It was much benefitted by the use of small doses of strychnia. The attacks now are of a very modified description, and occur at much less frequent intervals.

The second case was that of M. A. W., a young lady aged twenty-six and the effects, in this case were very similar. She had been epileptic for nine years, the attacks originating, in all probability, in the stoppage of the menstrual flow from exposure to cold. They came on at irregular intervals, were very convulsive, and she bit her tongue badly. She was pallid, and of a highly sensitive, nervous disposition. In this case, as in the last, I found that pressure over the medulla oblongata produced the most distinct aura the only difference being that the tingling sensation appeared to come from the pit of the stomach, and was accompanied by a slight feeling of sickness. In this case I obtained marked benefit from the use of sulphate of zinc, in combination with the sulphate of strychnia, as the attacks lessened greatly, the aura has become more and more indistinct. I merely mention these facts, as they appear to bear so strongly and to point so distinctly to the seat in which convulsions would appear to be organized.

To recur to the subject of treatment I wish to point out in what mode of administration and in what doses the greatest advantage is to be derived from the administration of strychnia. On my first trials of this remedy it appeared to me that large doses were necessary, and on reference to some of my earlier papers on the subject, it will be seen that the doses given were often very large. Lately, however, I have found that the use of very much diminished doses given very frequently, not only produce results quite as favorable, but the good effects more quickly, and there is less chance of attacks arising from accidental irritations in the early stages of treatment.

Dr. Brown Sequard and others have called attention to the good effects to be obtained by the exhibition of the sulphate of quinine in cases where the convulsive attacks are marked by a regular periodicity. All that can be said of quinine may be said with still greater truth of strychnia. In those cases where disorder has originated in deranged menstrual functions, and where the attacks come on with great regularity at the catamenial period, I always look to strychnia with the greatest confidence.