between the sagittal suture and the parietal eminences. The depressions extend forwards to a short distance from the coronal suture. When seen as a dry preparation, the skull has an appearance as if the two outer tables of bone had been sliced out, leaving only the inner table, which is of the thickness of parchment and quite translucent. On looking at the inner surface of the skull opposite to the depressions we find the bone perfectly normal in appearance and quite smooth, showing no evidence of external indentation.

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It has been my fortune to meet with no less than three cases: two in the dissecting-room, and one in a living individual.

Case I.—This has already been published (Montreal General Hospital Report, vol. i. p. 72). The case occurred in a female subject aged forty; the depressions existed on each parietal bone, were ovoid in shape and symmetrical, measuring 7 c.mm. in length by 5 in breadth.

The depressions were quite smooth, and "had the appearance of having been scooped out by some sharp instrument." The bone at the bottom of these depressions was of the thickness of paper.

CASE II.—This also has been reported (Annals of Anatomy and Surgery, vol. vi. 1882). I transcribe the description of the case:—

"The skullcap of an old woman over seventy presented a remarkable appearance. In each parietal bone, 1 c.m. from the sagittal suture, is an oblong, ovoid, smooth depression, measuring on the right side 7 c.mm. in length by 5 c.mm. in breadth, and on the left 8

c.mm. in length by 5.5 in breadth.1

"These depressions are about one centimetre in depth, and as they approach the coronal suture they increase their distance from the sagittal. They terminate anteriorly 3 c.mm. from the coronal suture. The deficiency of bone is evidently at the expense of the outer and middle tables, for the inner surface of the skullcap is perfectly smooth, the bone at the bottom of the depressions is quite transparent and of the thickness of parchment. In addition to the above described depressions, others are seen in the course of the lambdoidal suture." These depressions were similar to the parietal ones, and measured 5 c.mm., by 1.5 c.mm.

All the bones of the body in this old woman were atrophied, and of almost papery thinness. There was an intracapsular fracture of the

right femur.

CASE III.—This is the most interesting of all the cases, because it occurred in a living person, and the congenital history is well established.

¹ This specimen is in the Medical Museum, M'Gill University.