

removal the rigidity of the neck was quite manifest, as also photophobia. All night long after admission the rigidity was most marked, and by the early morning the patient had become delirious. She assumed the dorsal position with her legs slightly flexed upon the abdomen. The pupils were equal and somewhat dilated, the tongue was dry and cracked, the temperature was 104.5° , the pulse 110, and the respirations 26. On this, the fourth day of the disease, the petechiæ upon the trunk were more marked, and new ones had appeared upon the arms. There was also a transient erythema upon the chest and for the first time herpes developed below the left labial angle; and what was of still greater interest, upon the left side of the nose and cheek. The rigidity of the body seemed to be more general, and the nurse in charge noticed from time to time clonic spasms in the upper extremities. By the afternoon delirium gave place to coma. It should be here mentioned that the diagnosis of epidemic cerebro-spinal meningitis having been made, the patient had been carefully isolated as a precautionary measure. In addition to the above symptoms, there was now noted increasing rapidity of the respirations, general hypertonus of the muscles, flexion of the arms at the elbows, and extension of the lower extremities, but there was no paralysis anywhere. Strabismus was not evident. The thoracic organs showed no special evidence of disease, and the abdomen was normal to palpation. The urine was turbid, contained a heavy sediment of urates, was acid in reaction, and had a specific gravity of 1023; there was a large amount of albumin as also numerous granular casts of large size. On the following day the temperature was still higher, 106.6° , and the coma became deeper. The pulse now for the first time, became distinctly irregular, but otherwise no special change could be observed. The usual colour changes in the petechiæ were manifest and no new ones had appeared. Examination of the blood on this, the fifth day of the disease, by Dr. Robins, the Resident Physician, showed the red cells to number 5,130,000, white cells 22,000, and the hæmoglobin 75 per cent. Cultures from the blood of the finger, which had been taken the day before on agar, serum and broth, all remained sterile. On the following day, in the afternoon, the patient died, progressive asthenia being the only noteworthy change. Lumbar puncture was made the same afternoon, but the cultures resulting were contaminated, and gave no evidence of the meningococcus.

The treatment adopted was of necessity purely symptomatic and supporting, in this way differing to some extent from that adopted by the late Palmer Howard, who recommended bromides, and iodides with digitalis, and considered strychnine as contra-indicated.

Autopsy.—The autopsy was performed six hours after death with