

an unfavorable prognosis. This child was given quinine, in 5 gr. doses, to lower the temperature; whenever it should rise above the ability of wet cloths to the body to maintain it below  $101^{\circ}$ ; morphia was given in  $\frac{1}{2}$  gr. dose every two hours, whenever there was flushing of the face, cold extremities, or varying or dilated pupils, which symptoms generally occur together. She improved rapidly, and in a week was well enough to go about. Was this meningitis? could any one have denied it on the fourth or fifth day? But I have been told that this was one of the spurious cases, why, *because it recovered?* Now, this is one out of several that I have seen of this kind, and I would like to be informed if there is any other means of distinguishing a true from a spurious case of meningitis beside death, which diagnostic symptom comes too late to be of any avail as a guide for treatment.

Looking at the cause as one of irritation it appears to me that the indications are the same whether we have to deal with ordinary actions in the body stimulating an excited nerve centre, or whether we are dealing with extraordinary actions in the body exciting a healthy nerve centre; but as centre and periphery are so nearly related, disease at one end of a nerve induces also a like condition in the other, as, for instance, a thorn in the foot may produce central irritation of the whole nervous system; so also hyperæmia of the nerve centre causes spasms and inflammation at the peripheral extremity of the nerve. Accordingly we should infer that medicines which soothe the nervous system would be beneficial in whatever situation the irritation might be, whether it is to soothe an excited nerve centre so that ordinary actions in the body should not irritate it, or whether it is to modify violent peripheral action in order to prevent it from exciting a nervous centre which is not yet in a state of inflammation. Should these premises be satisfactorily established it would place the matter of treatment on a sound footing, whether we were dealing with a case of "spurious" or true meningeal inflammation. We would abjure all irritating medicines such as purgatives, as such are commonly used as derivatives, unless at the outset to make sure that the bowels were unloaded, or for the removal of worms which being greater and continued irritations, are to be removed preparatory to a period of the perfect

rest which it is to be our after endeavor to ensure. I should say that a mild purgative at the outset would be proper, but continued purgation, with a view of derivation from the head, I think is wrong and only tending to produce the condition which we desire to remedy. In a case of cerebro-spinal meningitis, which recovered, a child had no stool for eighteen days, then twelve, then eight days successively, after which the bowels acted regularly. The abdomen was flat and no evil resulted in the delays. Unless some special symptoms arise in the abdomen which might indicate an occasional purgative I am in the habit of paying very little attention to the bowels. Of the actions of medicines which have a soothing influence over the nervous system, I am most acquainted with opiates on this disease. Bromide of Potassium has not appeared to me to possess much power, though I have given it in 10 to 15 gr. doses, repeated every two hours, to children, and I have alternated it on different days with morphia with results always apparently in favor of the latter. Let us now notice the action of morphia on the several symptoms of the disease, especially one, in which this medicine is supposed to be contraindicated. Prominent among these is coma.

In the coma of compression, morphia could be of no benefit, nor could it do much harm, since death is always, I may safely say, the result; but it is otherwise in the coma of irritation, which is frequently mistaken for that produced by effusion. It appears to be of the same nature as that which occurs after a convulsion in which we frequently administer morphia or chloral, in anticipation of succeeding spasms, in order to intercept them. It is distinguished from that of compression by being accompanied by flushings of the face and spasmodic movements of the eyes or limbs, or an unequal distribution of paralysis or spasms; while effusion by compressing the nerve centers causes general depression of the vital actions, indicated by steady but slow movements, and general pallor of the surface and a lax condition of the general muscular system. I will give one or two illustrations of the coma of irritation which was relieved by the use of morphia. A girl seven years of age, who had been ill for eight days with all the symptoms of tubercular meningitis, was in a perfectly comatose condition. The pupils were widely dilated, insensibility of the eyeball, the respiration slow