

spoonful every three hours. An ointment of the Red Iodide of Mercury, with Extract of Belladonna, to be rubbed down the spine every four hours, and if scalp grows hot, ice to be applied.

21st.—Rigidity of legs set in yesterday afternoon and continued at intervals to-day; left great toe is extremely extended at times; no herpes nor articular swelling; slept in snatches last night; head not particularly warm; pulse, 150—weak, small, and irregular. Continue treatment.

22nd.—General tetanic spasm seized arms and legs yesterday, and have recurred at intervals since. In these attacks, the back, arms and legs became rigidly extended; the feet extended and adducted; the left hand clenched and pronated; pulse very small and frequent; child cannot last long. Death ensued during the night.

There is some room for question as to the true nature of this case, but I have myself no doubt that it was not an example of that common affection Tubercular Meningitis. It may have been an instance of that comparatively rare disease of which I have seen a few cases, Sporadic Cerebro-Spinal Meningitis; but, in view of the recent occurrence of several cases of "Epidemic Cerebro-Spinal Meningitis," it is not improbable that it was an example of the "Simple" form of the latter affection—that in which purpuric symptoms are wanting.

As to the *nature* of this so-called "Epidemic Cerebro-Spinal Meningitis," the opinion now generally held by pathologists, that it is a peculiar form of fever and not merely a local inflammation, is probably correct. For, first, the circumstance that there are varieties in the disease, in one of which the constitutional symptoms are so intense that they may destroy life before the local lesion—the inflammation of the cerebro-spinal membranes—has been developed, places this febrile affection amongst those well-known Fevers, Typhus, Enteric Fever, Scarlatina, Variola, &c., in which, occasionally, the same malignancy is observed, and the vital powers are overwhelmed in a few hours, before time has elapsed for the evolution of the disease. Secondly, the suddenness and violence of the invasion; the profound prostration of the nervous system at the outset, in severe cases, as shown in the pale cold surface, the feeble pulse and heart's action, the intense restlessness, peculiar stupor and the delirium; and the daily occurrence of purpuric symptoms, in some cases, render it highly probable that some morbid agent, some specific fever poison has entered the system.

Such is the case in malignant small-pox, for example, in which, together with similar prostration of the nervous system, there is a marked tendency to the occurrence of purpuric symptoms at