

voided with difficulty, and in small quantity at a time. A stimulating liniment was ordered to the spine, and the anodyne to be repeated at night.

15th.—Saw only any change since the previous day. Moves his legs, but still incapable of moving the arms. Pulse slightly accelerated and full. Breathing tranquil. Bowels have not been moved since the accident. To have a black draught immediately, and the anodyne at night if required.

16th.—Spent a restless night. He complains of a general feeling of discomfort, but of no particular pain. He moves the left leg readily, but when asked to move the right continues to move the left unconsciously. The paralysis of the arms is still almost complete. He passes his stools under him in the bed, and sometimes also the urine, though he is occasionally conscious of the desire to empty the bladder. The breathing is very laborious, all the muscles of forced respiration being brought into play. The surface is covered with perspiration, the pulse varies between 130 and 150, sometimes approaching 200, and has somewhat of a hard character.

He was again carefully examined, but nothing found sufficiently definite to make the existence of a fracture a matter of certainty. The spinous process of the seventh cervical vertebra, as formerly, was prominent, and seemed to move obscurely under the finger, but no crepitus was felt.

These signs, however, along with the symptoms of compression which were coming on, made it evident that pressure was being exerted upon the cord either by a fragment of bone, or by some effused matters, probably the former, for motion caused an aggravation of all the symptoms. About ten ounces of blood were taken from the arm, followed by cupping to about the same amount along the spine, and a pill, consisting of Calomel grs. ij. and opium $\frac{1}{4}$ gr., directed to be given every hour.

17th, 9, A.M.—Seems easier. The pulse, after the bleeding yesterday, became stationary at 130, and still remains so. The breathing is not so laborious, and he slept a little during the night.

12 o'clock, Noon.—Sinking. The breathing is slower, but more labored, the surface is clammy, and the pulse about 148, small and thready. He complains of very great weakness.

He was ordered six ounces of wine, and beef-tea, but about two o'clock he suddenly expired, after having been raised up in bed at his own request.

Autopsy.—The spine was examined about twenty hours after death, the body, meanwhile, having been lying on the back.

Cadaveric rigidity was extremely well marked, and there was the usual amount of gravitation of blood to the depending parts. On making an incision along the spine, the soft parts were found to contain an unusual amount of blood, and in several places there were large clots which had evidently been effused during life. On reaching the spinal column, the spinous process of the last cervical vertebra was quite moveable, and on examination, was found fractured on each side, immediately internal to the transverse processes. There was also a considerable separation between the bodies of the last cervical and the first dorsal. On raising the fractured spinous process, a large clot of blood, probably $\frac{3}{4}$ of an inch