

1-120 grain of atropia sulph. was administered hypodermically and artificial respiration commenced. Under this treatment the pulse came down to 100 ; patient opened his eyes and attempted to yawn. As soon as artificial respiration was stopped, he relapsed into former cyanotic condition. By means of this treatment patient was kept alive until the arrival of the attending physician in fifty minutes. He then diagnosed pressure of a fluid character occurring suddenly on the respiratory centre, and thought it useless to continue artificial respiration. Patient died within two or three minutes after its cessation.

A post-mortem examination was made next day by Dr. R. J. B. Howard. All the organs were carefully examined and noted, and nothing abnormal observed, except where it was expected to be present—viz., in the vicinity of the medulla oblongata. The membranes of the brain were found to be perfectly normal, except a small portion overlying the cerebellum between the flocculus and the medulla oblongata. On a superficial examination, pus was discovered in the arachnoid space formed by these membranes, between the medulla oblongata and the right lobe of the cerebellum. On carefully removing the membranes and raising the medulla, several drops of thick, creamy pus were observed between the cerebellum and the floor of the fourth ventricle. On compressing the right lobe of the cerebellum, pus was noticed escaping from its under surface, close to the inferior vermiciformis process. On cutting into this lobe, an abscess cavity of the size of a large filbert was found filled with pus. Here an inflammatory focus had developed into an abscess, which, gradually distending, found its way into the surrounding parts ; amongst others, into that which tolerates the least interference with its normal condition—the fourth ventricle.

*Remarks.*—To me, these three cases have been most instructive. I will refer first to the second case. I think I am quite justified in placing it amongst those of cerebellar disease, notwithstanding the absence of an autopsy. The extremely sudden nature of the death, the immediate arrest of functions of both heart and lungs, without any warning or without any convulsive symptoms, without the slightest interference with conscious sen-