June 4th. Slough separated; is a little deaf; pulse variable. Is now much excited, eats little and occasionally vomits.

17th: Since the 4th he has gradually become weaker, raves occasionally, brain still protruding; his sight sometimes impaired, pupil of the affected eye largely dilated, although still sensible to light; pulse variable; can answer questions rationally

24th. Tied a piece of cord round the tumour without causing any pain. Is very much excited; swallows with difficulty.

26th. Applied a fresh piece of cord round tumour which is now nearly isolated. Patient is now dull and listless; will often answer questions, and eats nothing.

28th. Tumour having become feetid, I removed it with my lancet; a considerable quantity of limpid fluid escaped.

29th. Seems revived; shows more sensitility; answers questions and takes food; tumour discharges freely bloody serum, which seems to come from brain.

July 2nd. Died at 9 p.m., 69 days after the accident. Has always shown since last report some consciousness; put out his tongue when asked. Brain not protruding. Since last removal, has had considerable trembling of hands and arms; grasped everything within reach.

Autopsy.—July 3. Body greatly emaciated. Brain sunk behind opening in skull; we removed the calvarium, found the dura mater much congested. The brain was completely removed from its attachments; there was much wasting and flattening of the right anterior lobe. Ventricle on both sides filled with purulent fluid, and freely communicated; the cerebellum seemed to be darker in colour than natural, and was partially softened. There was also a quantity of pus round the base of the brain. It was the 24th of May, a month after the accident, that he had the first rigor and in all probability pus was then formed. From the first day he had great difficulty in lifting his head from the pillow, and during the last five weeks there was total inability. The opening through the skull was about \$\frac{1}{4}\$ of an inch in diameter, and just under the frontal sinus there was a small spicula of bone pressing inwards. He was quite intelligent during the whole of his illness except during the last fortnight.

Huntingdon, January, 1870.

Note.—The above interesting case was accompanied with a photograph, but the delinestion is imperfect, and if copied would not have afforded a correct appreciation of the nature of the tumour. (Eds.)