

consisting of many pin-head or smaller reddish points, between which there is a grayish, yellow material consisting of pus corpuscles, serum and broken down tissue. It bleeds easily upon touching with a blunt instrument and is not hard, like an epithelioma. The margin is irregular, and the edges are perpendicular, except at one point to the right, where it is undermined. The tissue forming the margin is elevated, not very firm in consistence, not waxy in appearance, is reddish in color, about one-eighth of an inch in diameter and not very sharply limited. Outside of this somewhat limited elevated margin, the tongue is in an apparently normal condition, except to the right there are two pin-point whitish lesions—small ulcers—about one-tenth of an inch apart and one-eighth of an inch outside the ulcerated edge of the large ulcer. No enlarged glands about jaws. Six weeks ago he contracted a severe bronchitis which is now almost gone. At that time he weighed 180 pounds, the same as he weighed before the appearance of the ulcer, but at present weighs only 165 pounds. This weight he lost in six weeks and before that time he felt perfectly well, having a good appetite, no cough and lost no flesh. At present he has a poor appetite, and a slight cough. Has broncho-vesicular breathing at left apex with some elevation of temperature and increased heart action. No rales. Has marked wavy breathing.

Dr. Elliot could corroborate the diagnosis in one of the cases. He had examined microscopically, a piece from the patient's tongue some weeks ago. He had found no bacilli, but the histological structures of the growth indicated in a typical manner tuberculosis.

Dr. Robinson has not found bacilli in the patient's sputum but out of forty sections he had found bacilli in a few. He believed the first case was a primary tuberculosis of the tongue, as the patient has remained in excellent health since the local trouble began nine months ago until the attack of bronchitis six weeks ago. Since the attack of bronchitis he has lost in weight and presents evidence of a beginning tuberculosis of the lungs.—Dr. Robinson, in *Journal of Cutaneous Diseases*.

**EXPLORATORY TREPHINING AND LIGATION OF THE VERTEBRAL ARTERY.**—Dr. J. B. Beaver and Dr. Mills reported a case which they regarded as of unusual character and probably unique. The patient was a boy aged eleven, who had, in December, 1889, commenced to complain of pain in the head and some stiffness of the neck. Other symptoms, which had developed slowly, were failing sight, spells of nausea, occasional attacks of violence or excitement, strabismus, staggering in walking (a little more to the left than to the right), a feeling of dizziness described as "going over," and shortness of breath. Before the operation

double optic neuritis in an advanced stage was present. Hearing and taste were not impaired, there was no motor paralysis, nor was there disturbance of common sensibility. No nystagmus. Examination showed a pulsating tumor in the occipital region, slightly protruding through a small opening in the skull, to the left of the occipital protuberance. A distinct thrill seemed to be present. Three scars were noted on the posterior aspect of the head, one just above and to the right of the opening. The opening in the skull was enlarged so as to examine the supposed aneurism which appeared to be in the line of the lateral sinus, but when this was done the character of the swelling was too uncertain to warrant them to go farther. An exploring needle was introduced, the withdrawal of which caused bleeding which required long pressure to arrest. Later the left vertebral artery was ligated, but with no beneficial results. After the operation the pupil on the side corresponding to the cicatrix was contracted. The patient slowly grew weaker and died several months after the operation. Autopsy revealed a gelatinous mass which had occupied much of the fourth ventricle, reaching from or into the middle lobe of the cerebellum and both cerebellar hemispheres. The ventricles of the brain and their horns were enormously dilated, and at several places at the base rupture had almost taken place into the cranial cavity. When the spinal cord was severed from the oblongata, the central spinal canal was found to be one-sixth of an inch in diameter, and from it much fluid escaped. The chief points of interest were the reference to the diagnosis of aneurism, the mechanism of the process by which the opening in the skull resulted, and the production of the hydrocephalus and hydrorachis.

**SENSES OF MAN.**—Camille Flammarion, the French astronomer, in referring to the possibilities of creation and the imaginable inhabitants of other planets says :

"Terrestrial man is endowed with five senses, or rather with six. Why should nature have stopped there? Why, for example should she not have endowed certain mortals with an electric sense? with a magnetic sense? with a sense of locality? with an organ capable of preceiving ethereal vibrations, of infra-rouge and of ultra-violet? Of a sense permitting one to hear at a distance, to see through the walls. We eat and digest like the grosser animals. Do there not exist worlds where the nutritive atmosphere dispenses its inhabitants from so ridiculous a burden? The smallest swallow, the dusky bat itself has the advantage over us of flying through the air. Is not our world, where the men of the greatest genius, the most exquisite woman, finds himself or herself nailed to to the earth like the common caterpillar