

Strange to say, on the same afternoon Dr. Bessey asked me to see, in Fortification Lane, near St. Peter street, a boy of about ten years of age, who had been quite well on the 24th May, and was suddenly seized, on the 25th, with signs of collapse, cold surface, sunken eyes, rapid small pulse, cyanotic aspect. These symptoms were followed by those of reaction, attended, however, with convulsions, delirium, restlessness and more or less stupor. He had been ill about twenty-four hours when I saw him with Dr. Bessey. He then exhibited all the symptoms of profound collapse, combined with incessant restlessness, jactitation, delirium, and more or less stupor. Death ensued the same evening. It appeared to me to be an example of the third variety of the disease described by Radcliffe, the "Fulminant" form. I don't remember whether any spots existed on the surface of this fourth case.

I have mentioned these cases seen with my colleagues only with the view of proving that the disease is truly the so-called "epidemic cerebro-spinal meningitis," as they afford examples of two of its three recognised varieties. I hope they will themselves state to the Society the features of their respective cases.

All the subjects of the preceding cases, you will have noticed, were boys between eight and ten years of age, but on the 20th June I was requested to visit, in Ottawa street, a female child twenty months old, of whom the following history was elicited: In good health till 8th June, when it appeared less lively than usual; dull and drowsy upon the 9th, but not feverish; soon vomiting set in with fever, and then general soreness of the surface, so that the child cried when moved; during the first week the child frequently put its right hand to its head. No eruption on the skin was noticed, and the mother attributed the symptoms to teething.

When seen by me on the 20th, the child was in the following condition: Appears stupid and helpless; unable to sit up; pupils large and fixed; sclerotic uninjected; strabismus, with oscillation of eyeballs; moderate retraction of head; skin presents a peculiar, light scarlet blush, from capillary injection; a scratch is soon followed by a line of deeper redness, as if the capillaries had become suddenly enlarged ("tache cerebrale"); no rigidity of extremities; face pale; features vacant.

The retraction of the head had been noticed first on the 16th. The emesis has not returned; bowels move once or twice daily; urine is passed in bed; pulse small and shabby—120-130.

To have beef-tea, a teaspoonful of wine hourly, and the following mixture: R. Potass. Bromidi,  $\zeta$ iss.; Potass. Iodidi,  $\zeta$ i.; Digitalis Tinct.,  $\zeta$ i.; Syrupi Aurantii,  $\zeta$ i.; Aquæ ad.,  $\xi$ iv. A tea-