

In the chorea minor of children, who, as is well known, stand arsenic well, it is a common experience to find that twelve and fifteen minims of the liquor arsenicalis may be given daily without ill effects. Until two years ago, though I had often seen the symptoms of saturation above referred to, I had never seen any serious toxic symptoms referable to the nervous system, but we had at that time in the ward a patient with pernicious anæmia who had taken for a long time large doses of Fowler's solution, and under its use had feelings of numbness and tingling in the feet and legs, which we thought might be due to the arsenic. This may not, however, have been so, since these advanced cases not infrequently have sclerosis of the posterior columns of the cord, in connection with which loss of the knee jerk and sensory changes in the legs may develop. I have repeatedly in my clinics and ward class talks referred to the apparent harmlessness, so far as my experience went, of Fowler's solution.

On October 25th, 1892, the patient before you was admitted to my wards with Hodgkin's disease, the cervical, axillary, and inguinal groups of glands being involved. Having had under observation for now nearly four years a case of this disease, which has been remarkably benefited by the prolonged use of Fowler's solution taken at intervals, we naturally placed this man upon the same drug. The details of his case, so far as they relate to the lymphatic disorder do not concern us. The arsenic was begun on October 27th, given as Fowler's solution, and gradually increased. He took it on the first occasion for ten days; it was then resumed on November 14th, and in two weeks the dose reached fifteen minims three times a day. Towards the end of November it was noted that his skin, which was naturally of a somewhat dark colour, had a much deeper tint, and that of the abdomen was very distinctly bronzed. Throughout the month of December he did not do well. The arsenic was stopped on the 19th, and begun again on the 27th. From the outset the patient has had that interesting feature in many cases of Hodgkin's disease, an intermittent pyrexia, and as may be seen by his last week's chart, the