

Temperature to day 99° F.-101° F. During the spasms opisthotonos was marked; the "risus-sardonicus" was also well marked and perspiration profuse. The pupils were moderately dilated and active exaggerated reflex excitability was at all times present.

July 13th.—At 8 a.m. the temperature rose to 104° F. at 12.30 p.m. 106° F. The patient died from heart failure at 3.30 p.m. Unfortunately, no autopsy could be obtained.

Case 2.—Rheumatic Purpura Haemorrhagica.—E. K., female, an Icelandic, aged 20, was admitted May 9th, 1890, under Dr. Chown, complaining of pain and stiffness in both knee joints, incessant vomiting, general malais and a rash on the extremities and body.

Patients previous health up to about three weeks ago, was good, since which time she has suffered from anorexia; vomiting nearly everything taken into the stomach; irregular bowels and rheumatic pains and swelling of the knee joints.

A few days previous to admission, a rash was noticed on the arms and legs. Occupation, domestic. Has lived in this country over two years, and well dieted. She is a well nourished girl, face flushed, but anaemic and bears the expression of profound sickness. Eyes look dull and listless, pupils moderately dilated and active; anorexia; tongue dry and coated; bowels irregular; temperature normal; The skin is dry and harsh and covered with a purpuric rash, in the forms of both petechiae, ecchymoses and a few bulliform elevations about $\frac{1}{2}$ to $\frac{3}{4}$ inch in diameter. The rash is not painful nor tender; is most profuse over the extensor surfaces of the extremities and the chest.

Physical examination did not elicit anything abnormal with the heart, lungs spleen or other viscera; examination of urine with negative result. Vomiting has been severe and only relieved by entire rectal alimentation. Has had melaena and epistaxis, but not severe; gums not soft and tender; no haematemesis or haemorrhage from any other mucous membrane.

The following is a brief account of the progress of the case since in hospital.

For the first three weeks had an occasional attack of epistaxis, but never copious; melaena was frequent and copious, thus greatly weakening the patient.

Turpentine was found to have the best effect on the hemorrhages. The vomiting was only stopped by not giving anything by the mouth and rectal alimentation. The temperature at times was irregular but never high. The rash gradually faded and the patient continued to do well till about June 1st, '90, when a relapse occurred, with vomiting, diarrhoea and frequent and copious melaena. This lasted nearly two weeks when it again was checked and the patient made an uninterrupted recovery, being discharged as cured June 27, '90.

ARTHRECTOMY OF THE KNEE JOINT.

Paul Sandler (*Deutsche Zeitschrift f. Chirurgie*, Bd. XXX., p. 107) S. in previous communications upon this subject, maintains the superiority of arthrectomy over resection in the treatment of tuberculous disease of the knee joint. As a result of increased experience he now reiterates his formerly expressed opinion as to the value of the newer method. He combats the objections to the latter and claims for it healing without shortening and the occasional occurrence of mobility of the joint to a greater or less extent as a result of this particular procedure, and asserts that it should always, when possible, be given the preference. It is regarded as one of the most serious objections against the evasion, partial resection or arthrectomy, that foci of tuberculous deposit or infiltration are further apt to be overlooked, but S. asserts that large deposits may be diagnosed by circumscribed tenderness on pressure before the operation, and that smaller ones are easily recognizable by the fragile or carious state of the cartilaginous covering of joint surface during the operation. The principle recently emphasized by V. Zoeger, Manteuffel (*Centralblatt f. Chirurgie*, 1889, p. 483) that without exception, an operation for the radical cure of tuberculous joints necessarily involves, to insure complete success, the securing of a bony