Some blood may have escaped from the lung into the pleural sac immediately after the stab, but I believe the elastic tissue of the lung prevents any continuous escape from the visceral surface of the pleura. It has been my experience in a considerable number of penetrating wounds of the thorax, both by bullet and knife, that any large amount of blood in the pleural cavities has been the result of hæmorrhage from the intercostal vessels. The man in this case lived two days after the infliction of the injury, and sank from exhaustion and anæmia, consequent on the *slow* internal bleeding, which would be more likely to come gradually but continuously from such a source as the intercostal artery than from a vascular organ like the lung, whence one would expect a more profuse and more rapidly fatal hæmorrhage, if continuous.

Another great interest in this case is that a serious injury may be received by the heart without immediate fatal result, or indeed possibly without any fatal result, if only the injury is not in the areas occupied by the automatic motor centres, that is, in either the auriculo-ventricular or interventricular septa. In this case the wound was satisfactorily healing, and as before related was not the responsible cause of death.

Progress of Medical Science.

MEDICINE AND NEUROLOGY.

IN CHARGE OF

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ANTI-PHTHISIC SERUM, T. R. (FISCH), IN TUBERCULOSIS.

Dr. A. M. Holmes (*N. Y. Med. Journal, The Postgraduate*) reports thirty-one cases treated by this method, the time of administration extending over periods varying from one to eight months. In conclusion, he records the following observations :