tion entirely changed from that of a particularly "quiet, modest man to that of an extreme beaster. - :

September 8—Pulse become slow (60). Temp. down, 99¹₂. Dull mental condition. About this time paralysis of left side of face noticed. Retraction of neck still marked.

Transferred to Dr. Bell's Care.—September 9—Was in the following condition:

A tall, thin young man of wiry build, with a condition of intelligence improved from what it had been for a few days, but still noisy and talkative at ti es, wanting to get up, etc.; but can answer questions quite rationally. Severe headache on right side. Fundi normal. Movements of face weak on left side; retraction of neck prevented flexion of head. Noticed for first time, on morning of 9th, that the power of the left arm was almost gone-extensor paralysis at wrist with very weak flexion; at elbow very poor flexion with fair extension. Sensation impaired all over left arm. Power in left leg unimpaired. Pulse 50 to 60. Respiration normal. Over right mastoid region is the wound of first operation. Syringing through auditory canal causes flow of fluid from mastoid wound. There is subsidence of the inflammatory condition which had existed in neck below tip of mastoid, but with slight tenderness still remaining.

Operation.—September 9. Mastoid incision continued upward to parietal eminence, and an incision at right angles to it, passing forward from its center. Small piece trephined away one inch above zygomatic ridge, and opening enlarged by rongeur forceps. On opening through dura mater a flow of pus occurred (over $\mathbf{5}$ 1). Rubber drainage tube inserted, and was brought through skin in front of ear.⁴ Trephine tore away a branch of middle menningeal artery, from which hemorrhage was found difficult to control; forceps were left applied. A few sutures with iodoform gauze drain from behind.

September 10—Slept well. No pain. Can raise forearm and partially flex fingers. Face improved.

September 11—Rested well. Paralysis of extensors of wrist almost gone. Can flex elbow and extend it; can raise arm from shoulder.

September 12—Paralysis almost gone. Slightly restless. Dressing. Tube aspirated showed brain matter. Some pus drained out along forceps.