poral sphenoidal lobe in front and right side. Hemorrhage in the pia-arachnoid into the frontal lobes. Slight hemorrhage on under surface of right frontal lobe along the course of the olfactory nerve.

Base of Skull.—There is a fracture from the parietal eminence extending downwards, outwards and forwards, crossing the lateral sinus back of the fossa sigmoidea and turns inwards and passes forwards, ending in fossa one-quarter inch to foramen lacerum posticum.

Section.—On section, anterior abdominal wall three inches in thickness, two inches of which was fat.

Omentum.—Shows a large amount of yellow fat, overlies the liver and front of stomach.

Peritoneum.—Normal.

Pleura.—Right: Firm old adhesions behind, in front and below. Left: similar adhesions in front, above, below and behind; diaphragmatic adhesions.

Pericardium.—Slight adhesion between the pericardium and pleura on right side; contains bloody colored serum, one-half ounce in amount. Heart weight, 13 ounces. Surface of heart shows small clot plugging a small vessel at the auriculo-ventricular septum. Right side is engorged; pulmonary artery, muscle firm, slightly paler than normal; patchy atheroma of aorta. Coronary arteries—orifices free; fairly well-marked sclerosis of coronary vessels.

Lungs.—Right: weight, 29 ounces; anteriorly fairly well-marked emphysema; well-marked hypostatic pneumonia with edema, stage of splenization, friable. Left: weight, 21 ounces; hypostatic congestion and edema, very friable.

Spleen.—Normal, weight 2½ ounces.

Kidneys.—Right: 6½ ounces; large amount of perirenal fat, capsule slightly adherent; kidney substance pale, cortex narrowed, ureter normal. Left: 6¼ ounces, otherwise same as right.

Pancreas.—Normal.

Intestines.—Normal; mesentery diffuse lipomatosis.

Stomach.—Lining shows some chronic congestion.

Liver.—53½ ounces, pale, friable and fatty.

Gall-bladder.—Passages free; normal.

The mechanism of meningeal extravasation is very interesting to note, and has given rise to much discussion. It is very evident, from experiments performed, that there must be a separation of the dura from the skull, due to fracture or violence applied, and that the extravasation is consequent on that separa-