

mended that he should be placed in the asylum, a measure which was ultimately, with reluctance, adopted.

The patient, on entrance, presented a bewildered appearance; he spoke slowly, but with an observable lingual impediment. He very soon made himself perfectly at home; was pleased with every thing; *eat enormously*, and became fat and well-looking. He read or *appeared* to read a good deal; spoke little, but always pleasantly and *slowly*. At new year's time, his wife believed him quite recovered and fit to go home; and though I tried to dissuade her, and told her plainly my conviction that a crash was in the future, she could not yield her sanguine expectations. She took him home, and for over a couple of months he remained in a very satisfactory state, and they had many pleasant rambles about the city; but one day he was struck down by her side and had to be carried into the nearest house. This was the anticipated *crash*, the epilepti-form apoplectic seizure which I had foretold to his wife. Ten days after this seizure, having become unmanageable and destructive, his wife was forced again to ask for his admission into the asylum. When he entered, it was found that the power of swallowing was gone. He died in less than 48 hours.

*Post-mortem*, 160.—Register 2493.—The head only was examined.

*Dura mater* adherent to left parietal bone. A serous deposit beneath the arachnoid, over the superior and posterior surface of both hemispheres. The inferior and anterior portions of both anterior lobes, and also the superior surface of the left one presented a bright scarlet hue, which upon closer examination was seen to proceed from an inflamed condition of the arachnoid and the pia mater, not extending into the cerebral substance.

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