

September 1st. Both legs were paralysed completely and the left fore arm nearly so but there was fair movement in the arm. Some weakness of the right hand and arm. The trunk muscles weak but respiration was not affected. Temperature 101, pulse 90. By evening the left hand and fore arm were almost powerless, the right somewhat weaker. The intercostal muscles acting, but weak and restricted so that he complained of want of air. Swallowing not affected. Sensation normal and there was no pain. Temperature 103, pulse 90. Blood examination:—Red corpuscles, 4,500,000; Leucocytes, 11,400; Hemoglobin, 95%.

The differential count of the leucocytes showed:—Polymorpho-nuclear, 85; large mono-nuclear, 5; small mono-nuclear, 8½; eosinophiles, 1½.

September 2nd. Morning temperature normal, pulse 80, respiration rapid, shallow and labored. Lower extremities completely paralysed also left upper extremity except shoulder muscles in which there was some power. Right upper extremity weak. Intercostal muscles and diaphragm completely paralysed so that respiration had to be carried on by the muscles of the neck drawing upwards on the sternum. Artificial respiration gave some relief. Oxygen was unpleasant and made the throat sore. The mind was clear. Slight cyanosis. Condition continued much the same until death in the evening. There was no autopsy.

This case presents in a remarkable manner all the symptoms of Landry's Paralysis running an acute course.

A more distressing condition causing death it would be difficult to conceive. The struggle for breath was very great until the desire become lessened by the dulling of the senses by the gradual increase of carbonic acid in the blood. The marked, though short, fever shows that there was acute infection to which it is reasonable to attribute the rapidly ascending paralysis. The pain in the back and the hyperaesthesia make it probable that there was irritation of the posterior roots of the nerves and the slight leucocytosis was due to increase of the polymorpho-nuclear forms and probably caused by the infection.

CASE 5. I had the privilege of seeing this case with Dr. Bowie, to whom I am indebted for the following notes:

Emily M., aged 29, married, one child. Two weeks before this illness was treated successfully for tape-worm. Her illness began December 26th, 1904, with weakness in the legs. She was restless at night and had some pain in the legs but was able to stand next day. On the 29th, there was slight fever, legs quite paralysed, arms weak. The paralysis increased and involved the muscles of respiration. She died January 2nd, 1905.

When I saw her on the 29th, the third day of her illness, it seemed as if the progress of the malady would be rather slow and