

and our casualties were five killed and twenty-eight wounded.

CASE 1. *Penetrating Gun-shot Wound of Frontal Bone.*—The subject of this injury, a Sikh trooper, was hit by a stray bullet before the cavalry came into action. The bullet entered just above and to the right of the root of the nose. At the same time, also, the right eye-ball projected prominently forwards and was painful. He did not lose consciousness but complained of pain in the head, and especially in the right eye. The eye-ball was uninjured, but the conjunctiva was injected, and there was a small quantity of blood between the lids. He thought that the ball had passed out through the right orbit—a not impossible hypothesis, since bullets were coming across from our left, where the enemy was outflanking us. The subsequent history of the case, too, gave support for a while to his idea, for it seemed to indicate but slight injury to the brain. During the first eleven days the only symptoms were diffused headache and drowsiness, while there was dilatation of the right pupil and ptosis of the right upper eye-lid the two latter symptoms being not impossible results of an injury to the orbit only.

Suddenly, however, on the eleventh day new symptoms developed themselves—viz., epileptiform convulsions followed by coma. The first fit occurred about midnight on April 13th. This passed off in half an hour, leaving a condition of extreme susceptibility to muscular spasm; so much so that the attempt to give him a drink brought on locking of the jaws, twitching of the facial muscles on the right side, and spasmodic movements of the limbs. About an hour later he had a second fit, and the convulsive stage of this was of such duration and attended by such exhaustion—his body being bathed in perspiration and his pulse rapid beyond counting—that I resorted to chloroform-inhalation to bring on the stage of coma at once. A subcutaneous injection of one-sixth of grain of morphia was given to him while under the influence of chloroform, and he then slept for four or five hours. The next day, April 14th, he had a third fit, which was similarly treated, and since then up to the present date April 23rd, there has been no return. Dilatation of the right pupil and ptosis persist. There is, however, no squint, nor are any of