

24th.—Pulse has been more rapid, and is weaker. Condition the same. Ordered stimulants.

25th.—On passing catheter, about an ounce of urine containing creamy pus was removed; reaction acid, sp. gr. 1020. Does not take nourishment so well.

27th.—Pulse 124; respirations 24. Is weaker; tongue is getting dry. Pus in urine. Paralyzed parts remain the same.

29th.—Pulse 112; respirations 30. Patient weak and does not answer questions. Rigidity of leg not so marked to-day.

30th.—Respirations more rapid, 48, and patient is in a heavy soporose condition. Death took place at 7 p.m.

### *Autopsy.*

*Brain*—Dura very adherent to skull; sinuses full. Subarachnoid fluid in excess. Arteries at base atheromatous and stiff; contain blood and clots. In Sylvian fissures nothing special noticeable about the arteries. On cortex, Pacchionian bodies large; left hemisphere looks fuller than right; veins of pia mater full; arachnoid over sulci opaque. Sections—(1) Prefrontal, normal. (2) Pediculo-frontal, presents nothing special. (3) Frontal—On right side, the ganglia and white matter look natural; on left side, a brownish-red coagulum occupies the position of the caudate nucleus. It is immediately beneath the floor of the lateral ventricle, the lining membrane of which is thickened at this spot. Below, it rests on the optic thalamus and internal capsule, the fibres of which, between the caudate and lenticular nuclei, are softened, and, in places, have a greyish, almost puriform appearance. The outer section of lenticular nucleus is also soft, and of a pinkish-red color; inner sections look normal. The external capsule and claustrum are indistinct. Grey matter of island of Reil looks natural. The spot of hæmorrhage extends transversely for about 25 m. (4) Parietal—No signs of softening; tail of caudate nucleus, normal. Fibres of internal capsule of normal consistence. Grey and white matter of convolutions healthy. Ventricles are a little large; ependyma of left slightly yellowish. (5) Pediculo-parietal presents nothing striking. (6) Occipital section, normal. Crura look healthy. No evidence of