

knowledge of the manner in which convulsive phenomena are initiated, but will indicate the method in which disease in general acts to suspend or abolish the functional activity of different bodily organs.

In the third case referred to the peculiar appearance presented by the retinal veins is alluded to. The sudden evacuation of their contents was a phenomenon that at first seemed inexplicable, but subsequent observation revealed the fact that it occurred with inspiration, and was of the same nature as the collapse of the superficial veins of the neck, which can often be seen with that act.

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*Some Conclusions in Regard to General Paresis, with the Report of a Case under Observation.* By HORATIO R. BIGELOW, Boston, Mass.

A case of general paresis now under treatment, although only in the first of the three stages described by Calmeil, suggests a few conclusions in regard to some of the characteristic nervous phenomena which form a prominent symptom in the development of the disease.

*First of the Case.*—The patient is a man fifty years old, tall and stout; the forehead is very narrow transversely, depressed in the region of the spheno-frontal articulation and at the cranial and vertex; the face, when at rest, is entirely devoid of expression, the integumental folds are obliterated; the chin is corrugated from contraction of the levator-menti muscle; the complexion is sallow; the eyes are sleepy and dull, the pupil of the right being larger than that of the left, and dilating irregularly; there is an air of perfect placidity and great self-importance about the patient's demeanor; the appetite is almost voracious, at the same time that it is capricious; there is, also, occasional regurgitation of the food.

*Local Alterations.*—Muscles of tongue affected; there is hesitancy of utterance, inability to pronounce the labials correctly, a slurring, guttural manner of speech, but with no disposition to garrulousness, the patient recognizing his own defects; while giving utterance to certain words the head is thrown slightly upward, and the lower lip twitches spasmodically, conveying a peculiar motion to the chin; the tongue alternately contracts and relaxes when protruded.

*Motor Functions.*—Some of the local phenomena might point to a more advanced stage of the disease, were it not for the fact that the motor functions of the extremities are not perceptibly impli-