

was completely broken up, having a large clot of blood in its interior; this clot was continuous with the clots in the ventricles. Careful examination was made of the vessels by the blow-pipe, but no lesions could be discovered in the arteries at the base of the brain; from this condition hemorrhage must have occurred in the thalimi optici, escaping into the ventricles, and through the ruptured floor of the third ventricle to the base. A large amount of blood had escaped, and although not measured it must have exceeded seven ounces. No disease of the vessels was noticed, and it was impossible to discover if there had been any softening in the thalimi optici, as it was so completely destroyed. No disease nor lesion was observed elsewhere.

Montreal, February, 1874.

A Case of Pleuro-Pneumonia-Paracentesis. By
JOHN CHANONHOUSE, M.D., Eganville, Ont.

Laurence Curley, *æt.* 20, of a strong habit of body, a smart and active young man, and one who has always enjoyed good health. On the evening of the 20th May, having walked from the village to his home, a distance of three miles, and the weather being very bad, he received a severe wetting, and neglected to change his clothes.

Towards the morning of the 27th he had a chill, which, however, soon passed off. Three days afterwards he suffered from a sharp pain in the left side, also back part of chest and in the shoulder; this was immediately followed by fever, hurried breathing, flushed cheeks, cough accompanied by a rusty, thickish expectoration. The prostration of strength was extreme. The pain was so severe that he had to remain as motionless as possible. The slightest movement made him cry out in agony. On the 28th, 29th and 30th the fever greatly increased; but having just broken my clinical thermometer, I was unable to take the temperature, but it could not have been less than 104 or 105 during the hour of my visits, about eleven o'clock each day. There was now delirium and perspiration, pulse quick and small, tongue covered with a yellowish fur, no appetite at all. It was with the greatest difficulty he could be persuaded to take nourishment. Urine scanty, and of a high colour, and containing abundance of chlorides. In auscultating large gurgling crepitation was heard. At the commencement of the case I put him on large doses of Liq Ammonia acetatis, with a little solution of morphia. A large poultice was also kept applied to his side. The inflammation progressing so rapidly to the last stage made me change

the treatment to one more stimulating. I gave him ammonia and bark, brandy and egg mixture; but notwithstanding this, there was no improvement, and the patient remained in a lingering condition till one night he had a severe tickling cough, which continued all night, and early in the morning vomitted a large quantity of pus and jelly-like substance, which adhered to the sides of the vessel. Shortly before the matter was vomitted, both feet were cedematous. After this the oedema gradually disappeared. Cough, with expectoration of pus, was now more frequent, particularly at night, and hectic symptoms showed themselves. Ten days from this date, a bulging was visible between the sixth and seventh ribs, six and a half inches from middle of sternum posteriorly. This bulging increased, fluctuation became visible, and all the symptoms of pointing appeared. At this stage I thrust a large trocar into the most prominent part of the swelling, and by means of Mattison's No. 1 male tube, drew off three parts of a large basinful of pus. Immediately after this, the cough ceased. The following day I injected one part of carbolic acid to thirty of water, and much to my astonishment, a small portion of the injection came out by the mouth, and continued to do so for the three succeeding days, each time the injection was used. After the tapping, a drainage tube was put in and kept safely in its place by adhesive plaister and bandage.

The patient now began rapidly to improve, hectic symptoms disappeared, and appetite began to return. From this out, kept him on iodinised cod-liver oil, quinine, and as good a diet as could be procured in a newly settled country. The drainage tube was left in till the 21st August, that is, three weeks from date of tapping, and then removed. The wound healed kindly, and the patient on the 30th Sept. came himself to see me, and said he began to feel quite strong. He weighs now 128 pounds, while previous to his illness his weight was 147.

Eganville, Ont., January, 1874.

Correspondence.

To the Editor of the Medical Record.

SIR,—In the last number of the *Record*, please notice a short article on "Post Partem Hemorrhage, treated by acetate of lead, as a *dernier resort*" in the one case, and after having "*tried the usual treatment*" in the other; an expression not very definite.

Now, it requires, according to the writer's statement, a few minutes for the medicine to act; and