

went to the country, taking with him a supply of medicine, which, by the way, he never used, as he found himself so well—and I lost sight of him until the beginning of November.

I had never read of a case of Leucocythæmia having occurred in Canada, nor was I aware that this rare form of disease had as yet found a victim in this colony.

On the 15th December, at Dr. Howard's suggestion, I examined the freshly drawn blood under the microscope, and found almost the whole field filled with white blood corpuscles, *apparently* considerably smaller (one third, perhaps), than the red. The white corpuscles *appeared* to be several times more numerous than the red ones, but I could not at the time attempt to count the number of each in any area, and would not now like to hazard a guess as to their relative proportion. Niemeyer says, "while, in normal blood, there are 350 red blood corpuscles to one white one, in Leukæmia (as the Germans, after Virchow, and imperfectly, according to Bennett, delight to name this disease J. B.)—the number of white corpuscles may become so much increased, and that of the red ones so much diminished, that the former will become a sixth or even half as many as the latter. In the *splenic* form of the disease the white blood corpuscles are not distinguishable from those of normal blood; they are distinct, well-developed cells. In the *lymphatic* form, on the other hand, Virchow and other observers, found numerous free nuclei and small cells, both of which correspond exactly with the elements found in the lymphatic glands.

In the beginning of November I saw this patient again, and found him very much the same as when he first came under my observation, but now suffering from diarrhœa, as well as bronchitis. The latter was soon relieved, but the former persisted almost continuously until his death. Iodide of Potash and Quinine were now used with iron, and occasionally Digitalis, Squills and Colchicum, as diuretics. As a *dernier resort*, Warner's Pills of Phos-