ophthalmoscopic examination was made, and double optic neuritis discovered. Diagnosis—Abscess of cerebellum, secondary to car disease. Died July 13th, twenty-five days after admission. A post mortem revealed an abscess one-half the size of a hen's egg, in left lateral lobe of cerebellum. Unfortunately, I was absent from Montreal when he died, and did not see the post-mortem. No minute examination of the bone was made, and therefore the connection between the abscess and the disease of the ear was not discovered, though there can be no reasonable doubt that the two conditions stood in the relation of cause and effect.

CASE XVI.—A robust man, et. 45, came for advice, February 2nd, 1880, with the following history. Hard of hearing since childhood: this he attributes to the effects of searlet fever. The left ear was the better one until about the first of January past, when he took a severe cold and with it had an attack of car-ache. The pain subsided in a couple of days, after syringing the ear and applying poultices, but he continued to suffer from what he thought was neuralgia of the left side of head and face. For the past week he had suffered intensely from a deep-seated pain in the ear and neuralgia in the left temple. The pain coming on at 4 p.m., usually lasted till the following morning, with such severity as to render sleep impossible except when under the influence of morphia.

Noted when first seen—The right ear is now the better one; hearing 2/40; membrane has a silvery lustre, but is rather fallen in; left ear, hearing c/40; inner end of meatus reddened, so also is the periphery of drum-head as well as the manubruin; the membrane appears thickened and lustreless of a dull yellowish grey color and somewhat sunken; air enters both ears with a moist sound without improving hearing; tuning-fork on glabella loudest in left; a little tenderness at posterior border of left mastoid, but not a trace of swelling; evening temperature 100°, morning do. 99°; pulse 80 to 85, wanting in volume and rhythm. Diagnosis: Sub-acute catarrh of left tympanum with congestion of the mastoid cells.

After two weeks treatment the patient felt well enough to return to his business in the backwoods, several hundred miles