No treatment beyond the wrapping up of the limbs in cloths had been adopted before my arrival. I ordered the child to be given 5m. of fluid extract of hydrastis Canadensis every three hours, and to have cold cloths kept constantly applied to its abdomen. The case then passed out of my hands as I gave it up to the patient's regular attendant, but I heard that the child died a few hours after my visit. My reason for giving the hydrastis was to try and check any oozing that might have been occurring from the intestinal capillaries. It is greatly to be regretted that no post mortem examination could be obtained in this case, as it might have yielded valuable results, and would have shown any injury to the skull that might have been present.

The question now to be considered is, from what did the child suffer? Was the hæmorrhage due to injury, abnormality of some organ, such as the heart, or to some abnormal condition of the blood itself?

It can scarcely be attributed to a fracture of the base of the skull, as there were absolutely no head symptoms. If a fracture into the anterior fossa had occurred, you would have been pretty sure to have observed bleeding from the eyes, as well as some pressure symptoms, while if the fracture had taken place through the middle fossa, blood would have flowed from the ears.

A possible cause, in my mind, is some obstruction in the portal circulation, preventing the return of blood to the heart, and so causing an increased backward pressure. This proved to be too much for the gastric and intestinal capillaries which gave way in consequence. If this had been the only condition present, the blood would have coagulated as soon as voided as well as in the alimentary canal, whereas it showed but little tendercy to clot. From this last fact, I should judge that there was some altered condition of the blood itself, such as you get in hæmophilia. In order that this case may be compared with one of true hæmophilia in the new-born, I will narrate the following case, reported in the British Medical Journal for March 21st, 1891, by Dr. Jardine, of the Glasgow Maternity