

found very soft and dark-colored. Kidneys removed, and showed microscopically cloudy swelling.

Cultures from leg and blood taken with antiseptic precaution showed pure cultures of streptococcus pyogenes in great number.

The case illustrates how rapidly a patient may be carried off by septic infection through a very small abrasion, the time from the accident to death being only five and one-half days. The patient was a very strong girl, and apparently healthy in every other respect. She remained perfectly conscious until within a few minutes of her death.

TWO CASES OF POLIOMYELITIS ANTERIOR CHRONICA.

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CASE 1.—Notes, December 6th and 7th, 1898. Mrs. B., widow, aged 48. Family history, negative. Personal history: Up to present illness, patient engaged in grocery business, from which she turned out a competency of \$60,000. Always a strong, healthy woman, weighing when well 225 pounds. Of strong mental capacity and good business instincts. Could give from memory the minutest details of her business affairs. No children; menopause at forty-seven, at onset of present illness. Present illness began thirteen months ago. Onset with pains and weakness in ankles, knees and elbows, so that she was treated at Mount Clemens for rheumatism. The muscles of the thumbs then began to atrophy, and the weakness in the arms and legs gradually became worse. Patient did not lose much flesh, but muscles became very soft and flabby. Eight months after onset of trouble difficulty in walking was marked, patient could not walk alone; could not raise foot from the ground, and toes dragged. Bulbar symptoms developed during past two months. Present condition, thirteen months after onset: Patient unable to move about alone; muscles of hand and forearm atrophied; muscles of the calf atrophied, soft and flabby; rigidity and flexion of elbow; atrophy of deltoids, so that patient cannot raise the arms; toes drag; knee-jerk greatly exaggerated; sensation good; sphincters intact; mind clear and active. Bulbar phenomena were observed about two months ago—began with hesitation and thickness of speech. At present, tongue, larynx and lips affected; voice feeble, cannot speak above a whisper; speech slow and hesitating; articulation difficult and hard to understand; deglutition not impaired. This case is interesting because of the