

loss of power and sensation of the lower extremities, from the hips downwards, paralysis of the bladder, and involuntary escape of feces. The penis was in a state of priapism, but there were no seminal emissions, nor tympanitis. The power of motion and sensation were perfect in the upper part of the body, and there was not the least paralysis of any of the muscles supplied by the cerebral nerves; his intellect was unimpaired. The introduction of the catheter gave him no pain. On the feet being pricked or tickled, reflex motion of the limb was induced."]

The enema had operated twice; patient sensible of the operation, but expressed himself as unable to control it. The tenderness of the spine not diminishing, the leeches were re-applied, bleeding freely; the other treatment persevered in. The diagnosis of the case was, after a careful consideration of all the circumstances, defined as follows: Concussion of the brain and spinal cord, with subsequent extravasation between the last cervical and 6th dorsal vertebræ, with the possibility of an osseous lesion in the same region, of which, however, there was no positive proof. We were not insensible to the consideration, that laceration of the spinal cord to some slight extent might also have taken place. Regarding the case as one of great moment and danger, we advised that his friends at Hamilton should be notified of his situation without delay. Mr. F. was visited at 3, 8, and 11, p.m., at which latter time it was again requisite to have recourse to catheterism.

May 19. Patient seen repeatedly throughout the day. Symptoms without any alleviation. Fever increased, and pulse 110, small, yet still soft. A large blister was applied to the upper dorsal vertebræ, and an anodyne pill of hyoscyamus was prescribed at bedtime.

May 22. Superadded to the symptoms already detailed, there is now another—severe pain at the neck of the bladder, induced by the introduction of the catheter, which requires to be used every three or four hours. To obviate the frequent recourse to the instrument, the attempt was made to let it remain after introduction, but the pain and irritation excited proved so intense, as to demand its prompt withdrawal. The necessity for its so frequent introduction, seemed to be due to the irritability of the bladder, excited by the presence of even a small quantity of urine in it. In consequence of the insomnia, and as no head symptoms presented themselves, the anodyne was changed, and composed of the acetum opii as its chief ingredient. The calomel and tartar emetic were still persevered with.

May 25.—At the request of his brother, who arrived from Hamilton, Dr. Nelson saw the patient this day, in consultation with Dr. MacDonnell and myself. He was again most carefully examined, but with the same negative results, as regards fracture, as obtained on previous occasions. The views entertained of the case were fully acquiesced in by this gentleman, and in the plan of treatment pursued he entirely concurred.

May 26. Early this morning, Mr. F. was removed to the residence of an intimate friend, the fatigue of which he bore well. The general train of symptoms still continued unaltered. The constitutional effects

of the mercury having exhibited themselves in pyaemia, this medicine was discontinued, as was also the tartar emetic, and with the view of still promoting absorption of the supposed extravasation, he was placed on the iodide of potassium in five grain doses, repeated every four hours during the day.

June 1. From the 26th to the present date, there was little alteration in the case. Symptoms of myelitis began now to manifest themselves, indicated by renewed tenderness in the region of 2d and 3d dorsal vertebræ; flying pains extending down the arms, and to the head; the hoop sensation round the chest, &c. These were combated by recourse to the tartrate of antimony, conjoined with sedatives, and free counter-irritation over the painful vertebral region. The pain of his head, which he described as commencing at the occiput and darting rapidly to the frontal region, was of the most agonizing character. Concomitant with this alteration of symptoms, the urine began to alter in its quality; mucus in considerable abundance was mixed with it, as withdrawn by the catheter; and although he did not complain much when pressure was exerted in the suprapubic region, yet there could be no question of the existence of a slight cystitic affection. Catheterism now proved frequently exceedingly painful, and not unusually a work of considerable difficulty, in consequence of the violent spasmodic action of the sphincter. I will pass over the reports of several days, until that of

June 8., when I find the following train of symptoms. Patient worse, and apparently sinking. Pulse 136, small and weak; frequent attacks of darting pains through the head, commencing, as before, at the occiput; difficulty of breathing, with frequent sighing; sensation of tightness across the chest, with darting pains through that region; occasional pains in both shoulders; shooting pains down his legs; had scarcely slept any during the night, although he had taken three doses of the anodyne (each dose contained acetii opii m. xv); is restless, anxious, and fretful; had several involuntary motions during the night, the effect of a cathartic pill, followed by an enema. In consultation with Dr. MacDonnell and Dr. Nelson this evening, it was decided to put him on stimulants, and sherry wine was prescribed. This was done with the sole view of sustaining him until his brother's arrival, who was notified of the patient's state by telegraph. At this time we believed him to be sinking rapidly. The iodide of potassium was discontinued, and the blistered surface of the back having healed, tartar emetic ointment was ordered to be rubbed freely in.

June 9. Since the exhibition of the wine, the pulse has fallen in frequency, and improved slightly in volume. The pains shooting down the arms have ceased, but those of the head continue. He now suffers acute pain in the knees, on the slightest attempt at flexing the legs. It is necessary to notice that, during this period of his illness, stimulating applications had been frequently and freely applied to his legs, such as mustard frictions, hand-rubbing, &c. &c., and enemata had been employed as frequently as circumstances demanded. The exhibition of ordinary laxative medicines failed in the desired object, apparently in consequence of the paralyzed condition of