Symptoms of onset of present illness appeared shortly after a fall. Accompanying these symptoms there was epistaxis and the frequent evacuation of small quantities of bloody urine.

Dr. J. C. Connell, who examined the eyes, reported as follows:

"Fundus normal in both eyes; no pupillary reaction in right eye; normal in left; lesion of extra-ocular muscles not completely determined; divergent strabismus of right eye; movements of left not satisfactory; looks like paresis of left external rectus. There is at any rate involvement of third nerve of right side."

Heart and lungs normal; urine contained a small quantity of albumin.

The symptoms during her nine days' illness were mainly the symptoms noted on admission, only in a progressively aggravated form. Her temperature ranged about 101° in the evening, and 99° in the morning, reaching 105% on the morning of her death, May 29th. The pulse and respiration increased in rapidity in ratio to the severity of the other symptoms. Usually the bowels moved only when assisted by enemata, and the urine was passed involuntarily.

During the last two days nausea and vomiting followed by deep coma were the main features, terminating in death on the 29th, nine days after admission to hospital.

One very interesting sign was noticeable about the third day of the illness, viz., the dark discoloration of the fingers and thumb of the left hand, due, doubtless, to clots plugging the terminal arteries.

On the morning following her admission to the hospital she disclosed the fact that on the evening of May 19th her husband had knocked her down by striking a blow on the left temple, and that in the fall her head struck a corner of the sola. She also affirmed that her husband had kicked her several times after she had fallen.

It was found upon enquiry that the symptoms before described immediately followed the alleged assault. In view of the presence of well marked bruises, the history of epistaxis as one of the earlier symptoms, and the voiding of bloody urine, it was impossible to exclude traumatism as a probable cause of