

gelatinous condition of the tissues was found. A portion of this tissue was removed for the purpose of a bacteriological examination; cultures were made, and were found to consist of streptococcus pyogenes and staphylococcus pyogenes albus. Improvement again followed operation, and the temperature at 1.40 p.m. was  $98\frac{1}{2}^{\circ}$ ; the pulse, however, was 104. Nausea, continued more or less all day, despite all efforts made to control it.

Tuesday, February 25. The tender spot on the inner side of the arm above the elbow was found to be hard and brawny. Ether was administered, and several parallel incisions were made into this; the tissues presented the same gelatinous appearance. The nausea, from which he had been free for some hours previous to the operation, returned after the administration of the ether. Towards midnight hiccough began, and became troublesome. Morphia was administered and he fell asleep, but the hiccough continued during sleep nearly all night long.

Wednesday, February 26. At 7.20 a.m., the temperature was  $103\frac{1}{2}^{\circ}$ ; pulse 116. The hiccough ceased about 9 o'clock, and during the remainder of the day he was almost entirely free from it. He expressed himself as feeling better, and his attendants thought his condition decidedly improved. In the evening his temperature was  $102^{\circ}$ , pulse 116. Towards midnight, however, the hiccough returned; he was delirious at times, and became restless. He had a dusky complexion, and his pulse was 120, very compressible; respiration 24. The hiccough kept up all night long.

Thursday, February 27. The hiccough was very distressing for the greater part of the day; pulse very weak; he perspired very freely. Towards evening he was quite delirious, but he could be roused when spoken to, and would answer questions rationally. The wounds have shown no reaction whatever since incision. To-day, however, there was an angry red edge about each incision, presenting a very unhealthy appearance; there was no indication whatever of suppuration. Throughout there had been no recognizable affection of the lymphatic glands. The hiccough continued almost constantly.

Friday, February 28. The pulse this morning was very weak, and was 140 per minute; the hiccough was most distressing and constant. At midday 200 of Edson's aseptolin were injected, with no appreciable effect. He had taken nourishment fairly well throughout his illness, and the bowels had been kept fully active by the administration of purgatives. Towards night the pulse increased in frequency, running as high as 152, and was very weak; the hands and feet became cold. He was delirious, and was continually muttering and talking in an incoherent manner. Towards midnight he became very restless; he could be roused, however, when spoken to, and recognized his friends. Morphia was administered, and he then became quiet; the hiccough was not so constant. He gradually became weaker, the respirations became irregular, and he died on Saturday morning, February 29, at 6.20 a.m.