Face and lips: He has little power over the lower part of the face; the lower lip and corners of the mouth tend to droop; and the food collects in his cheeks.

The tongue is very feeble; he cannot protrude it to any extent, nor can he touch the roof of his mouth with it.

His palate can be raised slightly but if he tries to swallow, liquids come back through his nose; semi-solid food is swallowed though with difficulty, more easily in the morning—at times deglutition is impossible, especially in the evening, showing that his pharynx is also involved.

The nasal twang that you notice is further evidence of the feebleness of the palatine muscles.

The masticatory muscles are so affected that he cannot bite hard enough to hurt your fingers.

The larynx has apparently escaped, to judge from his voice and easy respiration. The paralysis, however, is shown by the laryngoscope. He can bring the cords together, and so phonates all right. On easy respiration the cords are fairly well separated, but on forced inspiration, instead of a wide separation, the cords approximate one another, reducing the rima glottidis to a narrow chink, due to a paresis of abductors of the cords.

The grip of his hands is fairly good; he can stand with his toes together and eyes shut; co-ordination is perfect; patellar reflex is accentuated.

Diagnosis-Progressive bulbar paralysis.

Treatment.—Put him on mixed treatment.

Sept. 21.—Stop mercury and continue the iodide of potash, sixty grains.

Sept. 30.—Patient reports some abdominal pain with tympanites last night. Reduced the iodide to thirty grains t.i.d.

Oct. 7.—Swallows and talks with greater ease; complains of cold hands and feet. Stop iodide and put him on arsenic and strychnine.

Oct. 13.—Has been in the country the past week; unable to swallow anything except his breakfast during that time. Has had considerable frontal pain and dizziness; cannot touch his lips with his tongue; tongue and lips less sensitive than before; two pins have to be two and one half inches apart on his cheek before recognized as two; on attempting to close his eyes there