

deposits over visceral and parietal peritoneum, evidencing acute general peritonitis.

Splenic and Portal Veins.—On the inner surface of the splenic vein, and also to a less degree in the portal vein, there are several rough calcareous plates and spines projecting into the lumen of the vessel. Firmly attached to these calcific spots, and extending throughout the splenic vein and into the substance of the spleen, and through the portal vein as far as its primary divisions in the liver, is a grayish-red thrombus, which at the bifurcation of the portal vein appears to completely occlude the lumen of the vessel. The thrombus is moderately adherent to the vessel wall, but is not organized.

Stomach.—Contains black coagulated blood.

REMARKS.—It would seem impossible, as the autopsy showed, to have been more definite in the diagnosis than to say there was some obstruction to the portal circulation, and yet I know of nothing that could obstruct the portal circulation and produce ascites so rapidly the first time as it was produced in this case, except thrombosis. The peritoneal cavity seemed to fill with fluid in ten days. We see cases of cirrhosis of the liver sometimes in which there is as rapid filling of the cavity as this after the patient has been tapped.

Had malarial poisoning, from which the General had suffered in 1864, in Louisiana, while serving in the Confederate army, anything to do with the causes of his death? There might have been at that time a portal phlebitis, which left a thickening of the coats of the vessel.—*N. Y. Medical Journal.*

SINGULAR FORM OF MALARIAL POISONING.

BY M. O. LOWER, M.D.

This case being a little singular, is my apology for reporting it. At 4 p.m. on the 16th of August, 1878, I was summoned to see Jacob K., a farmer, aged 50 years, living about three miles from town. I was told by the messenger that he was "jerking all over, and wanted me to bring my lancet along." I armed myself with the instrument and hastened to his assistance. When I arrived there I found him on the floor and apparently in the worst stage of chorea. By inquiry I learned that he had had a chill of ague in the forenoon of the same day, and instead of it being followed by fever, as is usually the case, he was seized with irregular contractions of nearly all the voluntary muscles, simulating chorea. It was so violent from the time of its commencement, which was 12 m., that he was nearly exhausted when I first saw him. He said that about 23 years since he had a chill and it was followed by the same symptoms. At that time they bled him freely, which gave instant relief and he requested me to do the same; but thinking it best not to resort to venesection, I gave him, as near I could guess—not having any thing with me to weigh it—20 grains of bromide potass. combined with 3 grains pulv. opii.; thirty minutes after the medicine was given he fell asleep, and the irregular muscular contractions ceased. I remained with him another half hour, and he was still sleeping, seemingly naturally. I told his wife to let me hear from him in the morning, which was done by himself coming to town; he said that he had slept about five hours after I gave him the medicine yesterday, and woke very much refreshed. His tongue at this time was heavily coated, and he complained of his limbs, back and head aching; he had all the symptoms of intermittent fever, for which I treated him. He then remained as well as usual until the 19th of September, in the same year, when I was called to visit him again, which I did, and found him in the same condition as in August, lying on the floor, with the irregular muscular contractions. I gave him the bromide and opium, which soon quieted the muscles and gave him

EFFECTS OF INTRAVENOUS INJECTION OF SUGAR AND GUM.—Mm. R. Moutard-Martin and Ch. Richet have studied the effects of the intravenous injection of sugar and of gum, and their researches have some bearing on the physiology of the renal secretion, for on determining the blood-pressure with a hæmometer, they have ascertained that the injection of gum materially increases the blood-pressure in the arteries, raising it from 0.03 to 0.05 mm. of mercury, whilst the injection of sugar has no influence on the pressure. Here then we have two substances, of which one, sugar, causes polyuria, but has no influence on the blood-pressure; whilst the other, gum, augments the blood-pressure, but, so far from producing polyuria, arrests the urinary secretion.—*Lancet.*