
On Feb. 28th she was admitted into the hospital, and her treatment was commenced. A galvanic current generated by two cells of a zinc-copper battery, was applied by Messrs. Mayer and Meltzer, as follows to the regions supplied by both spinal accessory nerves—The positive pole was placed at the highest point of the ear, and the negative at the upper part of the cervical spine. The negative pole was moved over the whole region of the terminations of the nerve, from the sterno-mastoid muscle in front to the lower angle of the trapezius muscle behind. At the same time the arm was exercised rhythmically, and the patient was made to shrug the shoulders, nod, and rotate the head, keeping time as she did so to the counting of the physician. During the passage of the current the spasms almost entirely disappeared, as before entirely made to function, the re- ramus of the jaw and the mastoid process. The negative pole was moved over the whole region of the terminations of the nerve, from the sterno-mastoid muscle in front to the lower angle of the trapezius muscle behind. At the same time the arm was exercised rhythmically, and the patient was made to shrug the shoulders, nod, and rotate the head, keeping time as she did so to the counting of the physician. During the passage of the current the spasms almost entirely disappeared, as before entirely made to function, the re- ramus of the jaw and the mastoid process. The negative pole was moved over the whole region of the terminations of the nerve, from the sterno-mastoid muscle in front to the lower angle of the trapezius muscle behind. At the same time the arm was exercised rhythmically, and the patient was made to shrug the shoulders, nod, and rotate the head, keeping time as she did so to the counting of the physician. During the passage of the current the spasms almost entirely disappeared, as before entirely made to function, the re- ramus of the jaw and the mastoid process. The negative pole was moved over the whole region of the terminations of the nerve, from the sterno-mastoid muscle in front to the lower angle of the trapezius muscle behind. At the same time the arm was exercised rhythmically, and the patient was made to shrug the shoulders, nod, and rotate the head, keeping time as she did so to the counting of the physician. During the passage of the current the spasms almost entirely disappeared, as before entirely made to function, the re- ramus of the jaw and the mastoid process. The negative pole was moved over the whole region of the terminations of the nerve, from the sterno-mastoid muscle in front to the lower angle of the trapezius muscle behind. At the same time the arm was exercised rhythmically, and the patient was made to shrug the shoulders, nod, and rotate the head, keeping time as she did so to the counting of the physician. During the passage of the current the spasms almost entirely disappeared, as before entirely made to function, the re- ramus of the jaw and the mastoid process. The negative pole was moved over the whole region of the terminations of the nerve, from the sterno-mastoid muscle in front to the lower angle of the trapezius muscle behind. At the same time the arm was exercised rhythmically, and the patient was made to shrug the shoulders, nod, and rotate the head, keeping time as she did so to the counting of the physician. During the passage of the current the spasms almost entirely disappeared, as before entire...

antagonist—and to have produced spasmodic contractions of one of the muscles supplied by it—viz., the right sternomastoid. When the patient was at her best, the right sternomastoid was constantly overcoming the antagonising action of the left sternomastoid, irrespective of the position of the head; but as the patient improved, and the left sternomastoid was of use in overcoming the right, the right sternomastoid was able to prevent the spasm by constantly keeping the right sternomastoid at a mechanical disadvantage. At first the head was kept twisted very much over to the right, so that with an imajury line connecting the two mastoid processes of the skull, the right sternomastoid muscle formed a more obtuse angle than would have been the case with the chin in the middle line, while the angle included by the same imaginary line and the left sternomastoid was more obtuse than would have been the case had the head been carried in its normal position. Gradually, as the patient improved, the difference between the two angles formed by the two sternomastoid muscles and the imaginary line got less and less, and at present there is scarcely a degree to choose between them.

At first the head was invariably jerked over to the left the instant that the chin was allowed to approach the middle line. Now, however, spasms are of very rare occurrence, and only occur when she is flurried. With the head in a more normal position "as she is now and taking thought," to prevent the occurrence of the spasms.

Acting upon this theory, the first indication in treatment was to remove the cause, and the patient was accordingly warned, however, that any attempt to continue her old occupation of needlework would almost undoubtedly result in the return of her old symptoms. Since leaving the hospital she has attended as an out-patient. Cases like this are often thought to be malingerers. It is right, therefore, to state that this patient was carefully watched, and that she was seen by many of the medical staff of the hospital, all of whom agreed that the question of malingerings was not tenable.

Dr. Poore regards the case as analogous in some respects to some cases of writer's cramp, the proximate cause of the symptoms being the tiring out of the muscles which support the left clavicular arch. The patient was a needlewoman, and accustomed to support heavy materials, often for hours together, on the left arm. The constant weight on the left arm seems to have produced an irritable and painful condition of the spinal accessory nerve, for although this nerve is spoken of as being entirely motor in its function, it is nevertheless sensitive when irritated. There is no more reason to suppose that the spinal accessory nerve was ever entirely motor in its function, than the faradisation of the branch of this nerve to the trapezius, it may be remarked that the pain was not aggravated by pressure, but very much so by contractions of the muscle. The irritation of the terminal branches of the left spinal accessory seems ultimately to have been reflected to the terminations of the nerve on the opposite side— its...
The operation contemplated was an amputation at the upper third of the arm, and the condition of that portion of the shaft above the fracture adverts room for doubt, it was considered that a higher amputation might lead. The physician in charge decided to remove the head of the bone, if necessary, when the patient was in a fit condition for the operation. He became insensible. They observed by some people who were with him to fall down in a few minutes past twelve. He was then brought to the hospital, but the patient died on the way. On the fifteenth day his sputa being frothy and copious. On the twentieth day his pulse was standing at 80, and he was out of bed for an hour with his clothes on. It remains only to be said that the stump has nearly healed, and the man pronounced convalescent.

The operation contemplated was an amputation at the upper third of the arm, and the condition of that portion of the shaft above the fracture adverts room for doubt, it was considered that a higher amputation might lead. The physician in charge decided to remove the head of the bone, if necessary, when the patient was in a fit condition for the operation. He became insensible. They observed by some people who were with him to fall down in a few minutes past twelve. He was then brought to the hospital, but the patient died on the way. On the fifteenth day his sputa being frothy and copious. On the twentieth day his pulse was standing at 80, and he was out of bed for an hour with his clothes on. It remains only to be said that the stump has nearly healed, and the man pronounced convalescent.

BRISTOL GENERAL HOSPITAL.

PRUSSIC ACID POISONING; DEATH; AUTOPSY.

For the following notes we are indebted to Mr. J. Howell-Thompson, physician's assistant.

R. F., aged forty-four, was brought to the hospital at 12.55 p.m. August 26th, dead. The history of the case was as follows:—A few minutes past twelve he was suddenly observed by some people who were with him to fall down in a few minutes past twelve. He was then brought to the hospital, but the patient died on the way. On the fifteenth day his sputa being frothy and copious. On the twentieth day his pulse was standing at 80, and he was out of bed for an hour with his clothes on. It remains only to be said that the stump has nearly healed, and the man pronounced convalescent.

BRISTOL GENERAL HOSPITAL.

PRUSSIC ACID POISONING; DEATH; AUTOPSY.

For the following notes we are indebted to Mr. J. Howell-Thompson, physician's assistant.

R. F., aged forty-four, was brought to the hospital at 12.55 p.m. August 26th, dead. The history of the case was as follows:—A few minutes past twelve he was suddenly observed by some people who were with him to fall down in a few minutes past twelve. He was then brought to the hospital, but the patient died on the way. On the fifteenth day his sputa being frothy and copious. On the twentieth day his pulse was standing at 80, and he was out of bed for an hour with his clothes on. It remains only to be said that the stump has nearly healed, and the man pronounced convalescent.

BRISTOL GENERAL HOSPITAL.

PRUSSIC ACID POISONING; DEATH; AUTOPSY.

For the following notes we are indebted to Mr. J. Howell-Thompson, physician's assistant.

R. F., aged forty-four, was brought to the hospital at 12.55 p.m. August 26th, dead. The history of the case was as follows:—A few minutes past twelve he was suddenly observed by some people who were with him to fall down in a few minutes past twelve. He was then brought to the hospital, but the patient died on the way. On the fifteenth day his sputa being frothy and copious. On the twentieth day his pulse was standing at 80, and he was out of bed for an hour with his clothes on. It remains only to be said that the stump has nearly healed, and the man pronounced convalescent.