normal, and she has a remarkably good appetite. Her bowels are constipated; calomel and sodii bicarb. were given in divided doses.

The patient went out with her son on October 8th perfectly restored to health and reason. She came back again the latter part of November to see if she could not find employment in the house. She looked very well indeed, and the frightful mental storm through which she had so lately passed, seemed to have left no trace on her mind.

This, I believe, is a very unusual termination for delirium grave. Spitzka says of its termination: "The majority of patients afflicted with delirium grave die in the delirious period after an illness of a few weeks; the excitement continues unabated for four or five weeks. The subsequent symptoms of stupor increase and the history closes with a fatal coma. Complete recovery never occurs; in rare instances, the patients emerge from this severe disorder with a slight defect; in others, paretic and terminal dementia supervene."

Correspondence.

MARCH 16TH, 1887.

To the Editor of the Journal of Nervous and Mental Diseases.

SIR:—Since the publication of my article on "Recoveries from Insanity in cases accompanied by Hæmatoma Auris," in the February number of your JOURNAL, in which I stated that "these four cases comprise, I believe, all that have thus far been reported," my attention has been called by Dr. Wm. Noyes, Assistant Physician at the Bloomingdale Asylum, to two similar cases that were reported by Dr. Brown, of that institution, now in Europe, in the *Medical Record* of June 19th, 1886.

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