October 12th. I was about the same; had pains occasionally throughout the day.

October 13th. I slept badly. The temperature varied during the day from 99.2° to 100.3°. Pulse 122. I abstained from solid food. Appetite was good.

October 14th. The tongue was slightly furred. I perspired profusely towards morning, and had occasional feelings of mild vertigo. Temperature 100°; appetite fair. There was no pain on deep inspiration. The urine was a little high-coloured. Temperature 100.2°.

October 15th. I slept a little better. There was no perspiration. Temperature 99.2°; pulse 100. I felt quite well after a cold bath, and hungry. I was obliged to eat plentifully at breakfast. The temperature at noon was 99.6°. I made a good lunch. The temperature in the afternoon was 100.4°; pulse 88. I had pains in the epigastrium, relieved by sal volatile. Temperature at 5 P.M., 100°; pulse 92. I felt well after dinner. The urine was loaded with lithates.

October 16th. Temperature 99.6°; pulse 84; tongue clean. Noon: temperature 99.6°; pulse 84. 3 P.M.: temperature 101°; pulse 100. 9 P.M.: temperature 100°; pulse 92.

October 17th. Temperature 99.2°; pulse 88. At noon: temperature 99.4°; pulse 104. 3 P.M.: temperature 100.4°; pulse 92. 4 P.M.: temperature 100.8°; pulse 88. 8 P.M.: temperature 99.4°.

October 18th. 7 A.M.: temperature 99.2°; pulse 88. 9 A.M.: temperature 98.4°; pulse 92. Noon: temperature 97.8°; pulse 80. 3 P.M.: temperature 100°; pulse 80. 8 P.M.: temperature 100°.

October 19th. The temperature varied in the same manner from 99° to 100.2°. The pulse in the sitting posture was 76; when standing, 96. After going slowly down stairs and up again (about twenty-four stairs), the pulse was 132. I had occasional shivers. The heart's action was feeble and irritable. The hands and feet were cold; the tongue clean.

October 20th. Pulse in sitting posture, 84; standing, 100. Temperature from 98.8° to 100°.

October 21st. Temperature from 99° to 99.8°; pulse 76 to 116, according to movement.

October 22nd. Temperature 98.8° to 99.2°; pulse 84 to 108.

October 23rd. Temperature 98.4° to 98.6°; pulse 80 to 94.

November 1st. Temperature 98.4°; pulse 84 to 108.

The chief feature in this attack of high temperature was the irritable heart's action; the beats of the pulse, on the slightest movement, being increased out of all proportion to the exertion taken. The respirations were increased from 16 to 24, and depended entirely on movement. The appetite was good throughout; and there was always a feeling of relief after dinner, although the temperature did not fall until morning. Some loss of flesh was noticeable after a few days.

The temperatures partook of a periodic character; but quinine in six-grain doses had little or no effect in reducing them, tending only to increase the irritability of the heart's action. For this reason, and wishing to observe the course of the fever, I abstained from that drug after thirty grains had been taken.

Previously to October 11th, I had had the best of health for some years; and, on my former visit to Davos in 1879, I experienced no disagreeable effects whatever from the change in altitude; but on that occasion I broke the journey at Chur for four or five days. I should recommend this plan of dividing the journey to be adopted in the case of invalids sent to high altitudes, as the result of such fever on a delicate person might be more lasting and of greater consequence than to one in the enjoyment of good health.

It is true that the majority of fresh arrivals here find themselves exhilarated and benefited by the rise; but there are not a few who suffer from high temperatures and irritable heart's action, etc., during the first fortnight. This, if possible, it is very necessary to avoid.

The pains in the epigastrium I attributed to an excessive secretion of gastric juice. They occurred on an empty stomach, were increased by the thought of food, and were immediately relieved by compound spirits of ammonia.

CASE OF SEVERE BURNING OF THE HEAD AND SHOULDER: RECOVERY.

By JOHN COCHRANE, L.R.C.P. & L.R.C.S. Ed., Edinburgh.

THE following case, the details of which I desire to record, is of considerable interest in several respects, mainly in regard to the magnitude of the surfaces of injury, the peculiar position of the parts involved, and the extremely intemperate habits of the patient.

On February 21st, 1879, I was requested to visit Mrs. B., who, I was informed, had been severely burned about the head and left

shoulder by falling into the fireplace of her bedroom. On seeing her, I found that the hair, skin, and deeper structures over the top of the head were entirely charred, and large sloughs were coming away. Linseed-meal poultices had been applied for a day or two before I was asked to see her. On the left shoulder and back of the forearm, I found a large sloughing sore, which had also been poulticed.

As to the cause of the accident, it appears that the lady, who is well up in years, had been for a lengthened period given to the abuse of intoxicating liquors, and, whilst under their influence, had fallen and rolled over into the fireplace. Being stupefied with drink, she lay with her head close to the bars of the grate. The result was that her hair was consumed, and in this condition she was discovered by a member of the family.

As soon as the sloughs separated, I dressed the ulcers daily with carbolic acid lotion, and occasionally varied this with zinc ointment.

On March 8th, seeing that my patient was losing strength, I prescribed some quinine powders, which benefited her much. In order to quiet the nervous system, which was sadly out of sorts, owing to her previous drinking habits, I prescribed, on the 10th, bromide of potassium; and, on the 18th, cough required treatment. She still, however, continued to indulge in stimulants, in spite of the remonstrances of her friends; and she gave her family the greatest possible annoyance. I found it an extremely difficult affair to get her to submit to my counsels; and I was often disheartened, during my daily visits, to find that she had returned to her old habits.

Being anxious to use a dressing which, whilst proving beneficial to the wounds, would at the same time remove the very disagreeable smell, I resolved to try terebene mixed with olive-oil. This was applied daily on lint with oiled silk above, with the use also of gauze bandages for the shoulder and forearm. I commenced to use this dressing on April 16th; but my patient complained that the bandages "cut her skin", as she expressed herself. However, I persisted with their use, and after a time she became accustomed to them.

On May 9th, she had a pretty sharp attack of erysipelas of the head and face—due, no doubt, to an extra fit of drinking. She suffered from extreme depression; and for a time I was very anxious about her condition. I had, indeed, little hopes now that she would rally; but, fortunately, through careful nursing and diaphoretics, etc., she gradually gained strength; and, after a few days, I had the satisfaction of seeing the disease abating.

On June 13th, I commenced to use boracic lint for the first time as a dressing to the head and arm. Zinc ointment was also occasionally ordered for the arm.

On July 19th, a lotion of tannic acid and glycerine was used for hardening the cicatricial tissue of the arm and shoulder.

On September 3rd, I used a lotion of boracic acid for applying to the head and arm at each dressing, previously to the application of the carbolic oil and lint.

By October 25th, the ulcer on the shoulder and arm had entirely cicatrised, without much contraction or dragging; and the patient could use the arm with the utmost freedom. As, however, there were some scales on the cicatrix of a psoriatic nature, which were a source of pain and annoyance to the patient, simple ointment was ordered to be applied; and also olive-oil, in order to soften them and allow their easy removal. She was also carefully bandaged; and this seemed to have a good effect in the prevention of too much contraction.

On December 3rd, a portion of the occipital bone, measuring four inches in length and two inches and a half across at its broadest part, separated as a sequestrum. This portion of bone weighs six drachms and one scruple, and is of considerable thickness. The surface from which it came has almost entirely healed, with the exception of a very small bit in the centre.

On March 15th, I measured the extent of the injured surface on the head, and found it to be seven inches in length, and across, at its broadest portion, four inches. The cicatrix on the shoulder and forearm measured eight inches in length, by four and a half in breadth at its broadest portion.

REMARKS.—I must acknowledge that, when I took this case in hand, I was not at all sanguine as to the result, considering all the circumstances connected with it; and it has been a puzzle to me how the healing process could go on as well as it did, seeing that Nature had to contend against so much. Terebene I found to be most advantageous in its healing powers; and its complete efficacy in removing the extremely disagreeable smell from the discharges of the ulcers was sufficiently established, and its agreeable odour tended to sweeten the air of the bedchamber, which made the work of dressing the sores less disagreeable to me. Dr. Patrick Heron Watson also kindly saw the patient along with me, and expressed his opinion that the result had been very satisfactory.