epigastric and abdominal pains, with some giddiness. In the right groin was a dusky red scaly rash; on the inner side of the right thigh was a similar, but much larger patch; on the penis, a cicatrix was found.

At first denying syphilis, he subsequently gave the following history. At seven years of age, he had rheumatic fever, but no other illness until two years ago, when he had gonorrhoea; sixteen weeks ago, he had a chancre, followed by an enlarged gland in his left groin; three weeks later, he had a sore-throat and a rash on the neck; he was then treated for syphilis, but not continuously. His parents are alive, but ailing; in his family, there is neither nervous disease nor phthisis. Five or six weeks ago, his right toes began to be numb and tingling; he staggered when he walked; the numbness spread up the leg; then the left foot and leg became affected; he was obliged to look at his legs when walking; he could not stand with his eyes shut or in the dark. At this time, he was still drinking rather freely. A fortnight ago (December 5th) he was quite unable to walk. Ten days ago his hands became numb and weak.

Upon this history being gained from him, mercurial inunction was at once begun; one drachm of blue ointment being rubbed in daily. He was kept at rest, had good food and no alcohol. He improved rapidly, so that on January 10 he could walk fairly well, could stand for a few moments with closed eyes, could cut up his food, grasp the dynamometer (right 53, left 51), distinguish two points of the aesthesiometer on the finger tips at a quarter of an inch from each other, and at one inch distance on the instep. The plantar and patellar reflexes were still absent. The inunction was continued until January 17th. He was discharged almost well on the 21st. A month later, the reflexes were normal.

Though the leading and most prominent clinical features of this case were thus finally seen to be those of locomotor ataxy, or posterior sclerosis, it cannot be taken as a simple case of that disease. The patient could neither walk nor stand at all, eyes shut or eyes open; so that, though he looked constantly at his legs when supported in the erect position, the sight of them did not help him. The equilibrating organ could not avail itself of information, reaching it through any channel. The really noteworthy feature of this case, however, is beside its accurate pathology. For the patient, having been quite well four months previously to admission and having then contracted syphilis, presented distinct symptoms of serious nervous disorder two months afterwards. I have previously seen nothing so rapid as this, except upon a single occasion.

Some years ago a similar case came under my observation. A young man, within a few months of his having contracted syphilis, presented, in addition to complete ataxy, certain specific signs which John P. did not present—for example, paralysis of the third nerve on one side. In him, perfect recovery ensued upon the very vigorous use of mercurial treatment, moderate treatment having been found wholly ineffective. Some authorities state that nervous diseases due to syphilis are not to be expected until from three to eighteen years have elapsed since the syphilis was acquired; but neither are changes in the arteries expected until after an equal lapse of time, yet cases have been recently recorded by Dr. Sharkey and M. Leudet, in which arteritis has followed the original sore in a few months. Now this question of the lapse of time appears to be one of some importance, for I do not remember ever to have seen a case of ataxy occurring many years after even indisputable syphilis, in which strong anti-syphilitic treatment has done any good whatever; early cases, on the other hand, seem to require very decided treatment. The reason why later cases are unaffected by that treatment has appeared to me to be that, during the interval, other causes of disease, perhaps several, or even many, have come into operation, and, aided to some extent by the specific taint, have brought about a condition of the nerves and sheaths which the syphilis alone had shown itself, even when in full vigour, unable in these persons to achieve. In such circumstances, no simple treatment, no single drug, no one precaution, is sufficient, or scientific, or in accord with common sense. It has been shown, indeed, that even such compositely caused disorders are not, when treated early, at all hopeless. But the case now under consideration is one of syphilis affecting, at an unusually early period, motion slightly, and co-ordination of sensations and movements gravely. Such cases appear to be as easily curable by vigorous treatment, specific and otherwise, as the commoner form of localised paralysis, due to a simple gumma.

REQUESTS AND DONATIONS.—Mr. Dennis Herbert, of Huntingdon, has bequeathed £200 to the Huntingdon County Hospital, £200 to the Earlswood Asylum for Idiots, and £100 to the Huntingdon Convalescent Hospital.

CONTROL OF THE LACTEAL SECRETION.

By J. STUART NAIRNE, F.F.P.S.

THE breasts of parturient women frequently give trouble from engorgement of the lactiferous vessels, and from other causes leading to tension and pain in these organs. The two following cases will illustrate the line of treatment I have followed for some years past under these circumstances, and which has never yet failed to afford me perfect satisfaction and my patients perfect ease.

CASE I.—Mrs. G., multipara, was confined of a dropsical and malformed dead child, at full time, on March 14th, 1885. The breasts, which had been small and hard before confinement, soon became engorged and swollen; and the patient was hot and feverish. Cloths moistened with whisky and vinegar were laid on the breasts, and 10 drops of the tincture of belladonna were given every hour. Within 24 hours, the throbbing, which had been very troublesome, had ceased; milk could be easily expressed from the nipples, and she complained of a very dry throat. When the throat began to become dry, the number of drops of the tincture was diminished. During 10 days she had this treatment; the last few days, 10 drops only three times a day; and by that time the milk had almost entirely disappeared, and the breasts were small and flaccid. They gave no further trouble.

CASE II.—Mrs. C. was confined of her second child on May 25th, 1885; it was very weakly, being born before its time. She had a rapid rush of milk to the breasts; and next day these organs were very much enlarged, tender, and hard, and the child could draw no milk from them, and was so weakly that I thought it would die. It was, therefore, fed with the spoon, and the tincture of belladonna was given internally, as in the first case. The breasts were supported, and gently rubbed from the circumference towards the nipple. Next day, she said she felt hardly any pain, and the milk could be easily expressed from the nipples. The belladonna was continued another day, by which time the breasts were so soft, and the milk was flowing so freely, that the child was quite able to take its own nourishment. The belladonna was then stopped, and the breasts have given no further trouble.

These are only two cases which I have described, because they have just occurred, and they point quite clearly to the powerful influence that belladonna has in modifying the secretion of milk. Of course, one might say that, after a few days, the breasts settle down of themselves to their work. Sometimes they do, and sometimes they do not. My observation points to the fact that poor women of their own accord fly to a hundred remedies to relieve them—seidlitz powders, castor-oil, rubbing with oil and various things, and exhausting the breast with some kind of apparatus; and frequently to no effect; and frequently, also, with no result, is belladonna applied externally. The worst suppurating breast ever I saw was one in which the extract of belladonna had been applied most faithfully. In fact, applied externally in any form, belladonna is most disappointing. It frequently fails to relieve pain, take out the heat, or reduce the secretion of milk; and the cleanest of its applications is dirty. The smell, too, is frequently exceedingly offensive to the patient. Belladonna given internally is at once cleanly and effective; and I believe that, administered with judgment and careful watching of its effect, it is a specific for such congested conditions of the mammary organs.

REQUESTS.—Mr. John Eden, of Beamish Park, has bequeathed £10,000 to the Durham Infirmary, £5,000 to the Royal Albert Asylum for Idiots and Imbeciles of the Northern Counties, £2,000 to the Brompton Cancer Hospital, £500 to the Royal Isle of Wight Infirmary at Ryde, £200 to the Gateshead Infirmary, and £200 to the Ramsgate and St. Lawrence Royal Dispensary.—Mrs. Mary Ann Blundell, of Alexandra Road, St. John's Wood, has bequeathed £100 to the British Home for Incurables, Clapham Rise.

BRADFORD MEDICO-CHIRURGICAL SOCIETY.—The annual meeting was held on June 2nd, and the following officers were elected. President, Dr. Goyder; vice-president, Mr. W. H. Ellis; council, Mr. Mossop, Mr. Miall, Dr. Craig, and Mr. Hirst; treasurer, Dr. Dunlop; secretaries, Dr. Rabagliati and Mr. Wilmot; auditors, Drs. Foster and Whalley; pathologists, Messrs. Carter and Spence.

DEATHS FROM STARVATION.—The annual return just issued of the number of deaths upon which coroners' juries have returned a verdict of death from starvation, or accelerated by privation, in the metropolitan district, in the year 1884, shows a total of 37 cases. Of these, 26 were in the eastern, eight in the central, and two in the western, division of Middlesex. The remaining case was in the Greenwich division of Kent.