

to his literary greatness. The appeal of his posthumous detractors is dismissed with costs." Mr. Augustine Birrell, too, who is quick to read the signs of the times, has written within the last two months—"Oh, young man, do not be in too great a hurry to leave your Carlyle unread." Naming the greatest historians of the day, Mr. Birrell adds: "But no one of them is fit to hold a candle to Carlyle. . . Excellent Thomas."

"Come back in sleep, for in the life
When thou are not
We find none like thee. Time and strife
And the world's lot
Move thee no more, but love at least,
And reverent heart,
May move thee, royal and released
Soul as thou art."

Mr. Arthur Balfour, speaking at Dumfries in August, while confessing that he was not of the "straitest sect" of Carlyle's admirers, was obliged to admit that he was a great genius, and had in him a force and originality which enabled him to speak to two generations of his countrymen with a power and force on some of the deepest and most important subjects which can interest us, as no other man has perhaps been able to do.

CLINICAL NOTES AND CASES.

A Case of Concussion of the Brain simulating Delirium Tremens. By J. R. AMBLER, M.R.C.S., L.R.C.P.,
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A man, aged 50, was admitted on 4th October and died 15th October, 1897. The medical certificate stated that he was suffering from delirium tremens.

On admission.—The left side of his face was much bruised, both eyes blackened, and there was a wound on the nose; coagulated blood was formed in the left ear. Mentally he was dazed and stupid, restless, muttering and incoherent in conversation.

Past history.—While on a voyage from London to Belfast some days previous to admission he had a serious fall which rendered him unconscious for a time. He, however, recovered sufficiently to be able to attempt the journey from Belfast via Dublin and Holyhead to London. He was found wandering about Crewe, and was ultimately taken in charge by the police and sent to this asylum.

For three days after admission he improved, became more coherent and rational, and was able to answer questions. Three days later he relapsed into the former rambling, restless and incoherent state, and gradually sank. Throughout the day of his death he was unconscious, with stertorous breathing, and died somewhat suddenly at 9.15 p.m.

Post-mortem examination.—Thirteen hours after death. Calvarium normal. A large quantity of serous fluid escaped on opening the dura mater, which was firmly adherent along the sides of the superior longitudinal sinus. Arachnoid and pia mater normal.

There was an effusion of blood on surface of brain in the Sylvian fissure and adjoining sulci on both sides, also on surface of left frontal lobe. The left cerebral hemisphere was congested, the right pale. There was also a small effusion of blood in the floor of the fourth ventricle on the left side.

The left lung contained a small calcareous tubercle. The aorta was atheromatous; calcareous nodules were noted on an attached border of the semi-lunar valves; slight incompetency in consequence. Liver large, fatty and friable. Spleen normal. Small cysts in right kidney.

Remarks by Dr. Lawrence.—The large quantity of serum underneath the membranes had probably been accumulating for some time before the accident, and was coincident with, and the cause of certain mental symptoms which had been observed for a few months previously. At the time of the accident rupture of capillaries had taken place; there had been a gradual oozing of blood, which, mixing with the serous fluid already in the Sylvian fissure and adjoining sulci, retained its fluid condition and ultimately produced the symptoms of compression which ushered in death. No symptoms directly traceable to the small clot in the floor of the fourth ventricle were observed.

The degree to which recovery of consciousness was manifested for three days is noteworthy.

Notes of a Case Introducing a Discussion on the Making of Wills by Certified Patients, and the Duties of Medical Men in regard to this. By W. B. MORTON, M.D., Resident Medical Officer, Brislington House, Bristol.*

The subject of these notes was a gentleman who was admitted under the care of Dr. Deas, at Wonford House, in

* Read at the Autumn Meeting of the South-Western Division, 1897.