

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
127	James Barton painter	68	April 8 <sup>th</sup>	Apr. 14 <sup>th</sup>	F. Dickinson	12 hrs.

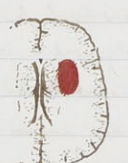
MORBID APPEARANCES

**Gen. condition** Ill nourished: 5' 7" high: hair dark grey. No edema.

**Brain.** 3 1/2. 23: Generally congested, internally & externally: some extra-vascular blood colour on the cerebellum and in one spot on the R. side of the cerebrum, - in the arachnoid.

**Congestion.** Arachnoid at base slightly thickened.

**Hæmorrhage.** A round or oval clot of blood, soft and black lies in a cavity in the R. centrum orale majus, in the position indicated in the drawing.



No size is about that of a walnut.

It has lacerated the outer border of the corpus striatum, but not affected the optic thalamus, and does not touch the cortex.

The sides of the cavity are more or less softened for a depth of 1/8" in the white matter, & 1/16" in the corp. striatum.

The R. optic thalamus is larger than the L.

The precise source of the hæmorrhage is not apparent.

The basilar arteries show hardly any atheroma.

**Lungs.** Deeply congested and very œdematous. Actual hæmorrhage at the bases & backs.

**Heart.** 12 oz: Uncontracted: empty. L. ventricle slightly hypertrophied. Valves natural. Muscle soft. Aorta dilated at the arch.

**Liver.** 3 1/2. 63: natural.

**Spleen.** 43: natural.

**Kidneys.** 2 oz: small: capsules adherent, surface granular: Substantia tough: Cortex very deficient. No lardaceous matter.

Bambard & Wm.

No. in Reg. 1880

453

NATURE OF DISEASE

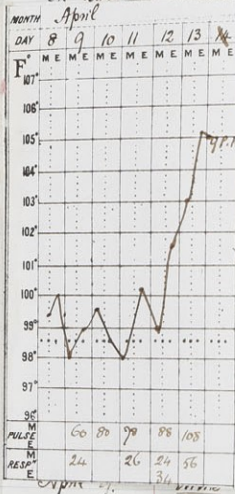
Cerebral Hemorrhage. Gran. Kidneys.

CASE

History

Not much obtainable. He was thought to have had colic once or twice: was not given to alcoholic excess, & up to the day of the attack had not complained of ill health. While at work on the morning of April 8<sup>th</sup> he fell down suddenly, became insensuous & partially lost the use of his L. side.

On Admission on April 8<sup>th</sup> at 2 P.M. he was so far conscious that flexing either side of the body produced expirations of air, no amount of shouting produced any evidence of consciousness. He was continually yawning.



He lay with eyes closed, deep but not stertorous breathing. On being shaken or he opened both eyes squally, well, they moved symmetrically. Pupils equal, contracted.

At 11 P.M. was fully recoverable, he continuously rubbed his face with the R. hand, & forced the R. arm & leg. In it was pinched.

At night of 4 arm, with very slight (apparently voluntary) movements of the arm & leg.

At 6 drawn to the R. = L. angle drops, wrinkles on L. side of face partially obliterated.

R. 60 hard & full. arteries hard. R. 60

No abnormal sounds. Heart: apex beat in 5<sup>th</sup> I. space under nipple, feeble. seemed distant: no murmur. Urine: pale: alkaline: no albumen.

On 11<sup>th</sup> Hydrarg. Sulphur grise were given on admission & on the 12<sup>th</sup> Potassi gr 1/4. The bowels moved till the next morning after an enema containing M. Elisha (Mxx)

On 12<sup>th</sup> passed on the 12<sup>th</sup> of the 9<sup>th</sup> was acid: amber-colored: clear: contained a trace of albumen.

He was never sensible on this morning; could open the eyes & move the R. arm & leg when told to, & attempted to put out the tongue but did not get it further than the inside of the teeth. He attempted to answer questions & said "yes" & "James Barton" indistinctly.

The continued yawning had ceased. The L. side was completely paralyzed. No apparent loss or increase of sensibility. He took nourishment well.

**Progress.** Gradually increasing insensuousness & paralysis for the next 3 days. The motions were passed under him, he made no sign of consciousness on being shouted to, he could still move the R. arm. The breathing became snoring, swallowing difficult; conjugate deviation of eyes to the R.

On the 12<sup>th</sup> at 7 P.M. a great change was said to have come over him, there was no convulsion, the nurse said "he became as you see him now". This condition was one of complete insensuousness, stertorous breathing - skin hot & moist, dusky face, paralysis of R. side of face, arm & leg. Eyes half closed, eyes deviated forwards, pupils equal & contracted. In this condition he remained till death at 2 A.M. on 14<sup>th</sup> (Mxx)

M. Niemi was given on the 10<sup>th</sup> repeated on the 12<sup>th</sup> April. Stimulants & nutrient enema on the 13<sup>th</sup>.

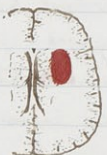
J. J. Macaulister Dundee.

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
127	James Barton painter	68	April 8 <sup>th</sup>	Apr. 14 <sup>th</sup>	J. Dickinson	12 hrs.

MORBID APPEARANCES

Gen. condition Ill nourished: 5' 7" high: hair dark grey.  
no edema.

Brain. 3/16. 2/3.  
Generally congested, internally & externally.  
Congestion - vasated blood colour on the cerebellum and in R. side of the cerebrum, - in the arachnoid.

Hæmorrhage.  A round or oval clot of blood, soft and a cavity in the R. centrum orale may position indicated in the drawing.

Its size is about that of a walnut  
It has lacerated the outer border of the corpus striatum affected the optic thalamus, and does not touch the  
The sides of the cavity are more or less softened for 1/8" in the white matter, & 1/16" in the corp. st.  
The R. optic thalamus is larger than the L.  
The precise source of the hæmorrhage is not apparent.  
The basilar arteries show hardly any atheroma.

Lungs. Deeply congested and very œdematous.  
Congestion & hæmorrhage. Actual hæmorrhage at the bases & backs.

Heart. 12 oz. Uncontracted: empty.  
Slight hypertrophy. L. ventricle slightly hypertrophied. Aorta dilated at the arch.  
Dilated aorta. Valves natural. Muscle soft.

Liver. 3/16. 6/3. natural.  
Spleen. 4/3. natural  
Kidneys. 8/3. small: capsule adherent, surface granular: } no lardaceous  
 } reaction  
Gran. change. Substantia tough: Cortex very deficient.

Bambardt Wm.

No. in Reg.  
1880

NATURE OF DISEASE

453

Cerebral Hemorrhage. Gran. Kidneys.

CASE

History

Not much obtainable. He was thought to have had colic once or twice. was not given to alcoholic excess, & up to the day of the attack had not complained of ill health. While at work on the morning of April 8<sup>th</sup> he fell down suddenly, became incoherent & partially lost the use of his L. side.

On Admission

on April 8<sup>th</sup> at 2 P.M. he was so far conscious that flexing either side of the body produced expressions of discomfort, no amount of shouting produced any evidence of consciousness. He was continually yawning & sighing. He lay with eyes closed, deep but not stertorous breathing. On being shaken or moved he opened both eyes squally, well, they moved symmetrically. Pupils equal, contracted.

The R. arm was freely movable, he continuously rubbed his face with the R. hand, & flexed the R. leg when it was pinched.

Slight rigidity of L. arm, with very slight (apparently voluntary) movements of the arm & leg.

Mouth drawn to the R. = L. angle droops, wrinkles on L. side of face partially obliterated.

R. 60 hand & full. anterior hand. R. 60

Lungs. no abnormal sound. Heart: apex beat in 5<sup>th</sup> L. space under nipple, feeble. sounds distinct: no murmur. Urine: pale: alkaline: no albumen.

U. Contents 107. Hydrarg. Sulphur grise were given on admission & in the eve. Phosph. 1/4. The bowels were not moved till the next morning after an enema containing ʒi. Turbith (1/2)

April 9.

Urine passed on the morn<sup>g</sup> of the 9<sup>th</sup> was acid: amber-colored: clear: contained a trace of albumen. He was more sensible on this morn<sup>g</sup>: could open the eyes & move the R. arm & leg when told to, & attempted to put out the tongue but did not get it farther than the inside of the teeth. He attempted to answer questions & said "yes" & "James Barton" indistinctly.

The continued yawning had ceased. The L. side was completely paralyzed.

No apparent loss or increase of sensibility. He took nourishment well.

Progress.

Gradually increasing unconsciousness & paralysis for the next 3 days. The motions were passed vesicular him, he made no sign of consciousness on being shouted to, he could still move the R. arm. The breathing became snoring, swallowing difficult: conjugate deviation of eyes to the R.

On the 12<sup>th</sup> at 7 P.M. a great change was said to have come over him, there was no convulsion, the nurse said "he became as you see him now". This condition was one of complete unconsciousness, stertorous breathing - skin hot & moist, dusky face, paralysis of R. side of face, arm & leg. Eyeballs closed, eyes directed forward, pupils equal & contracted. In this condition he remained till death at 2 A.M. 17/11/80

M. Niemi 6j was given on the 10<sup>th</sup> repeated on the 12<sup>th</sup> April. Stimulants & nutrient enema on the 10<sup>th</sup>.

J. J. Macwhorter Dundee.