

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death	No. in Reg. 1885	NATURE OF DISEASE.
100507 404 No 455.	Elizabeth Munns	24	Dec 13 th	Dec 18 th	H. Stewart	29 hours.	2028.	Anæmia.
							H. Stewart B.	Thrombosis of Cortical veins over Right Cerebral Hemisphere. Hemorrhage into Right Hemisphere

MORBID APPEARANCES.

Height 5 ft 5 in
Weight 75 lbs.

Very anaemic sallow complexion. Lips slightly bluish - moderately well developed. No oedema. Rigor mortis present, not noticeably more marked on either side.

Care to the right angle of the right scapula bone, it is extremely thin consisting only of outer plate over a small space of 1/4 in diameter the hollow being filled up by fibrous looking material, possibly clot from one of the smaller twigs of the Right Middle Meningeal Artery.

The longitudinal sinus contains a non-adherent clot, of the currant jelly colour and consistency anteriorly, but posteriorly granular, not homogeneous and friable - all the other longitudinal sinuses contain similar soft friable pale granular non-adherent clots and so also do several of the cerebral veins.

= Right Arteria. The vein lying in the Sylvian fissure is filled with a firm adherent, ~~soft~~ friable soft breaking down clot. There is some yellow sulphurous in the neighbourhood of the Ventricular branch, filled with autemortua clot, and the posterior end of the 3rd Right Temporo-Sphenoidal convolution is full of minute hemorrhages - No pus is seen elsewhere on the Brain.

Left hemisphere. The vessels on the upper surface of the left ascending frontal and parietal convolutions and also in the sulcus between the ascending frontal and precentral lobe, ^{contain} a well marked granular non-adherent clot, the continuous with and similar to those in the left longitudinal sinus. Between the ascending parietal convolution and Parietal lobe there is a deep groove in which lies ~~an empty~~ vein containing a little fluid blood but no clot.

The vessels and membranes at the base look ~~not~~ perfectly healthy - no embolism of cerebral arteries seen -

Internally ventricles not dilated. Numerous small hemorrhages scattered through the right basal ganglia and some of opening of the ventricles - Veins of Galen clot: all of them ~~not~~ that in

No. in Reg.
1885

2028.

H. Stewart B.

CASE.

History.

The woman was a servant. She had generally had good health. She said that about five years before she came to the Hospital she had Measles, and four years later her tonsils were "cut out".

She had always been anaemic, but her examinations were regular.

Admission.

She was an anaemic woman. She said that she felt well, and that she had come to the hospital to "have rest". Her appetite was good, her tongue clean, her bowels open. A systolic murmur was heard over the heart - at the base and at the apex.

Her breathing sounds were normal.

A strong purulent was found in her abdomen.

Temperature
Crush.

She was taken with Hand Paroxysm and put in "fish bed".

On December 16th the patient appeared to be stupid. She complained of headache. While dressing she felt faint and ~~wanted~~ to fall to the floor.

On the 17th or 18th am she had a "fit". The night nurse thought the fit was epileptic and did not send for the Stomatopician. The patient recovered at the mouth. In the early morning of the 17th she had four short fits, two of which lasted from 5 to 10 minutes. The fourth lasted three quarters of an hour. The woman was unconscious till 12 (mid day). She then complained of headache and of pain in her right ear. In the evening she had more fits, and during the night (17th-18th) she became unconscious and foamed at the mouth. The convulsions were bilaterally and equal on far as her limbs were concerned. Later the right side of her face was paralysed; she became unconscious and died.

The right cheek was puffed up when she breathed.

Richard Sibley.

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MORBID APPEARANCES.

Elizabeth Davies continued from P. 398.

The buccal valve of normal size - No petechiae or a buccal appearance anywhere - no D.M. staining of Endocardium
liver pale

F a little frothy mucus in bronchial tubes. Lungs & trachea healthy.

Liver pale. soft fatty. Spleen natural.

Kidneys Cysts in left in cortex. cortex in both pale. no other change.

Bladder distended numerous

uterus healthy. ovaries The Graafian follicles are very large as big peas and full of fluid.

Stomach and intestines healthy.

Tongue and oesophagus healthy.

The left upper last molar is much decayed - but no evidence could be found of either clotting arising in connection with the vein from this region

Weights of Organs B.

Right lung 18.

Left " 16

Heart 7.

Liver 50

Spleen 6

Kidneys 13.

J. G. Purse

CASE.

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MORBID APPEARANCES.

CASE.

Elizabeth Barnes. Continued from No 404. No 455

Pons-medulla. 4th ventricle and cerebellum appear healthy.
No sign of any tubercle.

Both Temporal bones and middle ears quite healthy
Eyes. R. disc swollen. whitish looks chapped and
edematous. Veins visible distended, no hemorrhages or
Nevritis

L. eye similar but less marked changes.

Surrounding the abdomen. muscles & skin wall are of a very good
color. No varicose. extremely hard and numerous Sebula in
rectum.

Heart. No Pericarditis. No fluid or adhesions in Left Pleura.

In the Right Pleura there is about $\frac{1}{2}$ pint of red brown fluid
and this has stained the surface of the Right lower lobe
by a deposit of a similar color. There apparently can be
no doubt that this is some altered blood pigment.

The fluid in the pleural cavity has several drops of oil
floating in it. more apparently than could have come from
the vaseline on my hands - lungs. The smaller bronches
after the 3^d or 4th division contain granular pale non-
adherent clots similar to those found in the sinuses
of the brain. They are better marked in the Right lungs than
than elsewhere. otherwise lungs seem healthy.

Numerous petechiae beneath the right parietal pleura.

Heart. Large. A clot in Right auricle continuous with
clot in large veins. Clot = black currant-jelly like. P.D.

The veins at the root of the neck have clots of this sort and
equally marked on the left side. There are similar ordinary
clots in the other cavities of the heart. The valves and
substance of the heart appear everywhere quite healthy.