Prognosis in Cardiac Disease.*

By Dr. J. E. Graham.

After referring to the importance of this, the subject, the essayist gave a somewhat long and full discussion of the subject, of which the following is a brief *résumé*.

Valvular lesions in early life, he said, were the result of endocarditis, the prognosis of which depended on the nature of the infective agent. That form, for instance, the result of the rheumatic poison, was more fatal than that caused by scarlatina.

The attending physician should not alarm the friends of the patient by predicting serious heart disease because he discovers a murmur during an attack of rheumatism, as it would often disappear. But if the murmur lasted throughout the acute attack it generally lasted through life. During the establishment of compensation the prognosis depends upon the treatment adopted and the behaviour of the patient. When compensation is complete, to determine the expectation of life enquiry should be made into the extent of the lesion; the length of time during which it has existed; the changes which have taken place in the heart as the result of the lesion; the condition of the other organs of the body; the temperament, mode of life, habits, and calling of the patient; hereditary tendencies; and the presence or absence of other disease.

The extent of the lesion could not be arrived at by auscultation alone; but, considered in connection with the length of time during which the disease has existed and the changes in the heart, it is a most valuable means of prognosis.

In considering the question of estimating the extent of the lesion, he spoke highly of Broadbent's work on the subject, on which he had consulted freely. In mitral insufficiency, a slight murmur in an apparently healthy heart, indicated a small lesion. A loud apical murmur, extending around to the spine, indicated an extensive lesion. Sometimes, however, a loud mitral regurgitant murmur may exist when the lesion is slight. When the bruit takes the place of the second sound it indicates a want of closure of the valves — a serious lesion. A soft, blowing sound with a dilated heart, indicates a weak myocardium, and (consequently) extensive disease. The musical mitral sound was indicative of a

* Abstract of paper read at Toronto Medical Society, January 14th.