

## Selections.

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### Treatment of Aneurysm of Aorta.

Four considerations must be remembered in the medical treatment of Aneurysm of Aorta:

1. The situation, the volume and the physiological importance of the aorta make it impossible to apply the means which are used in aneurysm of other arteries.

2. There is always difficulty in rightly appreciating the value of a treatment, because (a) certain aneurysms of the aorta develop with great slowness; (b) after a period of rapid growth, they often remain stationary; (c) at the beginning of a stay in the hospital or of treatment which keeps the patient quiet, the changed manner of living often produces an improvement of the functional disturbances and at times of certain physical symptoms.

3. Aneurysms of the aorta may be cured spontaneously.

4. Some of the etiological conditions may become the point of departure of therapeutical indications.

An instructive example of spontaneous cure is that of a woman of 79 years, seen by Prof. Robin at the *Maison de Retraite des Ménages*. The patient said she had never had a day's illness. She succumbed to an attack of broncho-pneumonia, which she resisted for a period of 19 days. At the autopsy, beside the classical lesions of broncho-pneumonia, there were found two cured aneurysms of the abdominal aorta. The first was a fusiform aneurysm, situated just below the diaphragm, filled with white fibrinous clots, very hard, stratified, adherent to the aortic walls. The second, almost immediately below the first, on the anterior wall of the vessel, was also filled with white clots, stratified, old, those nearest to the orifice of the sac being softer and of a reddish hue. The aorta was, throughout, hard and marked by cavities and calcareous flakes.

So, it appeared manifest that two aneurysms could develop and be cured with no outward manifestations of the pathological and curative processes. In this cure, the arterial wall and the circulating blood each played a part. In the arterial wall, there was seen an infiltration of embryonal cells which produced a resisting tissue. At the same time the inequalities and the roughness of the lining membrane caused the formation of clots. The blood performed its part, by clotting, and forming successive layers of fibrin. Thus is explained the spontaneous cure.