Urine Examination.—Diminished quantity. Some hyaline casts. Albumen varying from day to day. Sometimes absent. Some edema of the feet and legs, especially the ankles.

Diagnosis.—General arterio-sclerosis (so called interstitial, nephritis, dilatation of the heart with faulty compensation.

Treatment.—Absolute rest in bed. Strychnine sulphate in increasing doses. (Morphine in minute doses to quiet pain and allay nervousness.)

Diet.—Nourishing. Eggs (raw), albumen water, meat juice, broths, milk. Gradually increased and vegetables added, as bread, potatoes, etc. First the small quantities at frequent intervals.

Result.—Marked improvement in course of time, but very slow. Gradual contraction of area of cardiac dullness, and increase in quantity of urine, disappearance of edema, asthma and attacks of tachycardia and sterno-cardial pain. Graduated exercise advised in the shape of walks (only a few steps at first), and advised her to go to Prof. Schott early in the spring of 1907. I gave her a letter of introduction, as I knew it would do her good there. I worked with him in 1899, and knew she needed his good care and advice. I was extremely interested and worked hard with the case. There was little to work on but with her co-operation, I am happy to say, and the grace of the Creator, and Dr. Schott's able advice. I believe she was even more improved than when I last saw her."

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On the 27th of May, 1907, she came to Nauheim, where she remained nine weeks and had thirty-one baths. She had occasionally bad seizures during her stay in Nauheim, but on one occasion only was digitalin administered. She spent five weeks in Switzerland as an after cure, and returned to America in November, and her physician, Dr. R., was only called in to prescribe for two slight attacks until her return to Nauheim in May, 1908. She told me that she had greatly improved so far. She was able to take a fairly long walk, and in all respects appeared to be regaining ground since the recommencement of the baths.

This case greatly impressed me, because there was very marked arterio-selerosis, myocarditis, and murmurs to be heard both in the mitral and aortic areas.

Case No. 11.—Myocarditis following influenza. Mitral murmur with relative insufficiency. Judge B., Boston, Mass., aged 54.

In 1889 was accepted by two insurance companies, and re-