

his face and lips pale; he complained of great prostration of strength, headache, and pain in the limbs; his sleep was broken, and disturbed by dreams; his tongue was covered with a moist creamy fur; he had occasional sickness, almost complete anorexia, and his bowels were confined. He had no pain about the chest; no cough nor dyspnoea; his pulse was 90, regular, and of only moderate fulness and strength; his chest expanded well, and the breath and pulmonary stroke-sounds were healthy; but the cardiac dulness on percussion extended over a larger surface than natural; and this was more prominent than the corresponding part upon the opposite side of the chest. The impulse of the heart was somewhat strong and a faint thrill was communicated to the hand; over its base the heart's sounds were not perfectly healthy, the first being somewhat murmurish; over its apex a rough, irregular, creaking, double-friction sound was heard, which, in passing to the right and left of this point, became single and gradually inaudible. There was no marked heat of skin, nor thirst. He was not confined to bed, but, on the contrary, sat up during the whole day. His urine was abundant, pale, acid; sp. gr. 1010: and on one occasion only was it found to be slightly albuminous.

Treatment and progress of the Case.—As it was evident that the cardiac disease was of some duration, and his enfeebled state forbade the idea of depletion being entertained, the treatment consisted in the repeated application of blisters over the region of the heart, and the careful employment of mercury: whilst it was attempted to sustain his strength by light and nourishing food, of which, however, he could take but little. On being repeatedly interrogated, he sometimes, admitted that he felt pain about the lower part of the ensiform cartilage and between the shoulders, and he had occasional palpitation of the heart. He had never any cough, and little, if any, dyspnoea; his pulse ranged from 90 to 120; it became small and feeble, but remained regular; his urine was constantly pale, and of low specific gravity. He was never brought under the influence of mercury; for after its exhibition for a few days, an attack of dysentery compelled its withdrawal, and the simultaneous complete failure of any dispo-

sition to take food left him in such an exhausted condition that he died in a state of imperfect coma about twelve days after the commencement of the treatment. He was not confined to his bed until the last few days of his life. About a week before his death, numerous purpuric spots appeared upon his arms and legs. The friction sound remained audible until three days before his death. He never had delirium, or any other cerebral symptoms but those above mentioned.

Examination of the Body forty-eight hours after Death. —There was a high degree of emaciation. The head was not examined.

Chest.—There was some slight old adhesions of the left pulmonary and parietal pleura: there was no effusion into the plural sacs. The lungs were somewhat congested, inferiorly and posteriorly, but were otherwise perfectly healthy. The heart was larger than natural, weighing ten ounces. Over its base and the greater part of both its anterior and posterior surfaces, the pericardium was adherent by means of a thick layer of tolerably firm lymph; the connections, however, were broken down without much difficulty, and the opposed surfaces were left covered with irregular masses of red exudation matter, in some places a third to half an inch in thickness. Near the apex were some flakes of softer lymph; and between the unadherent portions was contained about an ounce of bloody serum. The walls of the heart were rather soft, and of dark red color; but near the base, on the posterior aspect, there was a spot of the size of a shilling, where they were thin, and of a pale buff color, which was proved by subsequent examination to depend upon a deposit of fat; upon the corresponding pericardial surface there was a small clot of extravasated blood. The inner surface of the heart and aorta was stained of a deep red color, and the free margins of the aortic valves were slightly thickened, and the endocardium in their neighborhood had lost somewhat of its transparency.

Abdomen.—The kidneys were slightly above the normal size; firmer than natural: the cortical part was pale, and the distinction between it and the medullary portions less strongly marked than usual.