

of the Canadian Medical Association, is passing through the press, I am perusing, for the first time, Sir Henry Thompson's admirable work, "Practical Lithotomy and Lithotrity." Although many of Sir Henry's observations are embodied in Holmes, Gant, Erichsen, and other works of systematic surgery, the comprehensive and exhaustive nature of his monograph can only be appreciated on perusal. While much of what I have written is fully and ably treated by Sir Henry, I am not a little pleased that many of the impressions conveyed to my mind by the observation of a few cases on this side of the Atlantic, are the echoes of more powerful impressions on the earnest mind of the most accomplished living lithotritist, by the treatment of cases more than twelve times the number.

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*Aneurism of the Thoracic Aorta, Commencing below the Giving-off of the Left Subclavian Artery.* By GEORGE ROSS, A.M., M.D., Professor of Clinical Medicine McGill University, Attending Physician to the Montreal General Hospital.

(Read before the Medico-Chirurgical Society of Montreal.)

I think the following case of sufficient interest to present to the society as affording an example of this dangerous and suddenly fatal disease, occurring with hardly any symptoms which might warrant its positive diagnosis during life.

M. M., aged 37 years, first consulted me on the 2nd of July last. He was a tall, well-built man, of tolerably robust frame, but with hair nearly white, which, of course, is unusual at his time of life. He had always enjoyed good health until last spring, when his present illness began; he had, however, during some years previously, been of very intemperate habits. He had never had syphilis. He complained of severe pain in the left side, and had, he told me, been treated for a length of time, in the country where he resided, for pleurisy. The pain, he said, had commenced about three months since; had been getting gradually worse, and he had never been since entirely free from it. The suffering was referred *particularly* to two points—one about the middle of the left interscapular region, and the other in the very centre of the left lateral region; but it also radiated from these points over the whole side, and sometimes up as far as the shoulder. It was described as of a *burning* character generally, but sometimes *lancinating*—increasing, at irregular intervals, to great intensity, preventing sleep, and involving great physical torture. As a general thing, the pain was increased towards night, and he felt better in the morning. He had a poor appetite, and had been