

thus explained. Blood-pressure being diminished in the aneurism the pus would more readily enter into the circulation.

No erosion of the spine existed and the left lung was the only organ which showed pressure effects. Dr. Clark made an excellent photograph of the specimen and from it was obtained the accompanying illustration which will convey a better idea than words of the form and size of the aneurisms.

#### DESCRIPTION OF THE SPECIMEN.

The heart is slightly enlarged and fatty, the valves normal. The aorta is atheromatous and the arch dilated, its lumen measuring  $1\frac{1}{4}$  inches in diameter. The first aneurism occupies the highest portion of the descending aorta. Its length is 5 inches; greatest breadth 5 inches and greatest thickness  $3\frac{1}{2}$  inches. Although no microscopical examination of the walls has been made it appears to be a true fusiform aneurism and contains a well organized, laminated, coagulum through which the blood-stream flowed. The clot is quite decolorized in the outer part but not so much as towards the centre, and the innermost layer was easily detached. It is  $1\frac{1}{2}$  inches in thickness, anteriorly by  $\frac{1}{2}$  inch laterally and posteriorly. The lumen is  $3\frac{1}{2}$  inches in its transverse and  $1\frac{1}{2}$  inches in its antero-posterior diameters in the largest part. The vessel wall is very atheromatous and friable. The second aneurism is situated immediately below the first and is four inches in length, two inches in thickness and in breadth at its largest part. It also contains a well organized clot  $\frac{3}{4}$  inches in thickness anteriorly but only  $\frac{1}{8}$  inch laterally and behind.

The clots themselves, apart from the vessel, form strong tubes, and the patient would undoubtedly have lived for a very considerable time had it not been for the accident of suppuration of the sac. The abscess had apparently commenced behind and extended laterally on both sides, so as almost to encircle the coagulum. Its origin can only be conjectured. There is no history of an injury to the back of the patient.

The specimen has been presented to the museum of Queen's College.

JOHN WEBSTER.