

For the physician of such a patient there are a few useful pieces of advice:

(1) Get a full history, not only of his medical past but of his habits in every regard.

(2) Make a top-to toe bare skin examination.

(3) A blood-pressure estimation.

(4) A case of advanced arterial change may not have a complaint. If you discover it accidentally, your duty is as plain as under other circumstances.

(5) Look at his temporal, radial, brachial, femoral. If you are competent look at his retinal arteries.

Look for a strong apex beat, an accentuated second.

(6) In a middle aged person loss of weight may be the only sign of arteriosclerosis.

(7) Beware of a diagnosis of neurasthenia in the middle aged.

A DESCRIPTION OF THE RIVA ROCCHI SPHYGMOMANOMETER

An apparatus for estimating arterial blood pressure or pulse force, modified by
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The most valuable indication derived from palpating the pulse is an estimate of arterial tension, and the value of such estimates is in direct proportion to their accuracy.

A knowledge of actual, numerically determined pulse tension is of speech value in the diagnosis of many morbid conditions where variations from the normal are characteristic; for example, in apoplexy, traumatic brain compression, surgical or traumatic shock, nephritis, cardiac diseases, aneurism, lead poisoning, concealed hæmorrhages, uræmia, etc.

Also in the treatment of conditions where correction of an existing pulse tension is aimed at, under which are included all the conditions just mentioned above, and in addition the large class of toxic cases in which depression of the vaso motor system is a prominent feature and calls for stimulation. In these cases it is specially important to be able to follow accurately variations