related to the liability to facial—which, moreover, he showed might be inherited, citing an instance where five cases were observed in one family.—(*Lancet*, March 2nd, 1889.)

Purulent Pericarditis.—Chéron (L'Union Médical, No. 31)* says surgical interference is called for when the effusion by its quantity threatens to arrest the action of the heart; that in such a case the presence of a concomitant pleural effusion must not be overlooked, and if existing should be dealt with first. Secondly, when the effusion is of long standing and consequently liable to induce change in the cardiac muscles. Thirdly, the fact of the effusion being purulent. Fevrier (quoted by Chéron) does not refrain from recommending tapping in tubercular pericarditis, in spite of the fact that out of twenty-two cases of this form of pericarditis so treated, twenty patients died at various intervals (from eight hours to seven months) after the operation. Fairly good results have been obtained in hemorrhagic cases, five out of nine having recovered after tapping. In serous effusions simple puncture suffices, but in purulent cases the pericardium must be incised. Out of fifteen cases of purulent pericarditis treated by operation eleven died. The operation must not be delayed, and he attributes to that circumstance an instance where sudden death followed washing out of the sac, the heart being probably degenerate. The site selected for puncture by the aspirator should be the fourth or fifth interspace to the left of the sternum. For free incision it is recommended to select the fifth interspace; and to incise the tissues layer by layer for a distance of three or four centimetres, taking care to avoid the internal mammary artery, which may need to be drawn inwards; then having exposed the pericardium it may be carefully incised with a pointed bistoury, the portion of the membrane being drawn forwards by forceps. Great care should be exercised in irrigation, if this be employed.

Quoted in Lancet, March 23rd, 1889. See also Quarterly Retrospect of Medicine, Montreal Medical Journal, Feb. 1889. p. 599.