

case of aortic aneurism, I determined to conjoin these with iodide of potassium internally. I enjoined absolute rest in bed, allowed eight ounces of *white* bread and one pint of water per diem, and ordered five grains of iodide of potassium in an ounce of water three times a day. Now for the progress of the case, which I saw at intervals of three days, and I would draw especial attention to the rapidity of the improvement, and the total disappearance of the aneurism. In three days, on the 12th, the swellings had perceptibly subsided, and the dyspnœa was much relieved; the history of that in the U. T. may be disposed of in a few words: it subsided gradually and uniformly for fifteen days, at the end of which time no aneurism could be distinguished. The rest of my remarks apply to that in the L. T.; on the 18th, from being a diffuse shapeless swelling, it had contracted to the size of a large hen's egg, dipping under the sterno-mastoid muscle, much firmer, impulse and sounds diminished. 24th. Reduced to the size of a walnut. April 1st. Size of a pigeon's egg. 6th. Size of a large hazel nut. 21st. All trace of aneurism gone. It is worthy of notice, that the aneurism regularly diminished from above downwards, and without inwards, so that when it was reduced to the size of a hazel nut, the finger had to be pushed under the cloidal insertion of the sterno-mastoid and close to the clavicle in order to feel it. I have no doubt that there were two sacculi, one filling the U. T., the other and the larger the L. T.

On the 1st April, the diet was increased to 12 oz. bread, half pint milk, and a pint of water. 6th April, allowed to get up. 21st. Released from all restraint as to diet or exercise. He was directed to continue the iodide of potassium for two months longer as a precaution. I next saw him on the 15th May, when he had recruited his strength very much, and left for home. I heard of him up to 25th August; he wrote that there was no sign of the disease returning. I am firmly of the opinion, that had not scant diet and absolute rest been conjoined with the iodide of potassium, no such successful result as now detailed would have been obtained. It would be a great satisfaction to me to hear of the same plan being pursued in cases of aneurism in other parts, *e. g.*, popliteal aneurism, when the application of a starch bandage would ensure perfect rest to the limb, not omitting, however, the recumbent posture. Of course, there was considerable loss of weight, but the emaciation was confined almost entirely to the muscles. Before taking to bed, the patient's muscles were hard and salient; but at the end of three weeks, when the diet was first increased, the limbs were round and soft like a woman's, but not much diminished in size, and the skin had the waxy watery appearance of oligomia. The explanation seems to be this: the tempe-