

result of any parasitic disease. It is also apparent from the absence of a primary necrosis in any of the tissues of the vessel wall that the cystic dilatations do not represent focal necroses of the arterial wall. This conclusion is also borne out by the absence of inflammation about the lesion, and the healthy state of the vasa vasorum of the part.

On the other hand, the tissues about the cyst presented the effects of pressure, originating within the cyst, demonstrating the presence of an active secretion into the cavity. Moreover the contents of the cyst had the appearance of a coagulated, albuminous fluid, such as might arise from a serous fluid. Evidence is also at hand that the secretion in the smaller cysts began before the tissue elements of the part showed any signs of destruction. These early cysts developed in the immediate neighborhood of the elastic fibrils leading to slit-like dilatations and separated the muscle bundles from the main elastic lamellæ. These situations are those of the normal lymphatic spaces of the arterial wall.

We are thus led to conclude that the most probable explanation for these dilatations is that there has been some obstruction and stasis in the local lymphatic channels, which have led to a retention of the fluid and dilatation of the normal lymphatic channels. It is more than probable that the multiple cysts which were present, were along the same route, or emptied into the same lymphatic channel which was obstructed. The condition is thus to be regarded as a lymphangiectasis in the media.

We have not been able to find any report of a similar condition in the literature.

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## AN ANALYSIS OF TWO HUNDRED AUTOPSIES UPON INFANTS.

BY

JOHN MCGRAE, B.A., M.B., M.R.C.P. (Lond.)

Lecturer in Pathology and in Medicine, McGill University; Assistant Physician, Royal Victoria Hospital, Montreal.

The series consists of 204 cases of which only 37 per cent are over two months of age. The age incidence by months is as follows: 1st, 57; 2nd, 71; 3rd, 31; 4th, 16; 5th, 3; 6th, 6; 7-12th, 11; over 1 year 4. It will thus be seen that 73 per cent of these cases are in the first 3 months of life. Four, only, are over 1 year, and the oldest is 2 years. The children were nearly all born at the Montreal Maternity or the Women's Hospital, Montreal, and innutrition is a prominent feature throughout. In the majority of cases the cause of death can be found. The commonest lesions are broncho-pneumonia and gastro-intestinal