hæmorrhage. violent palpitation of the heart, throbbing and enlargement of the thyroid. The case was diagnosed as one of exophthalmic goitre. Men are seldom attacked by it. It is chiefly met with in young women about the age of twenty to thirty years, and is sometimes met with in several persons in the same family. Persons who are anæmic or chlorotic are especially liable to it, as are also hysterical and neurotic subjects.

Symptoms.—Increased action of the heart is first noticed. At first and for a time this may only be occasional, but it soon becomes constant. The pulse rate varies from 120 to even 200 per minute. The cardiac impulse is exaggerated, the sounds loud and ringing, and not infrequently a blowing systolic murmur is heard at the base or apex. The area of cardiac dullness is not increased. The carotids throb, and with the hand a pulsation or thrill is felt in the thyroid. The pulse in the radials is not unusually forcible. Swelling of the thyroid may not come on for some little time, or it may appear simultaneously with the increased cardiac action. The enlargement may be symmetrical or it may be only one side, and then generally the right. It generally is not excessively enlarged, though cases are recorded where it has caused inconvenience by pressing on the trachea. The third cardinal symptom is prominence of the eyeballs, which varies greatly In some cases the stare is only a little more than is natural, in others it gives a fierce and savage expression Cases of great prominence are recorded, where the eyeballs have been forced so far forward as to expose the insertion of the recti muscles into the sclerotic. Trousseau records the most notable case on record, in which one of the eves actually came so far out of the orbit that it had to be pushed back by the fingers. In moderate cases the eyeballs may be so prominent as to prevent the closing of the lids during sleep, resulting in inflammation of the cornea. Fatigue in using the eyes is at times complained of. The ophthalmoscope shows tortuous and dilated condition of the retinal veins. The cause of this prominence of the eyeballs is not settled, and has been attributed to turgescence of the vessels in the orbit or an overgrowth or swelling of the fat in the cavity. When death supervenes, the prominence of the eyeballs, as a