

The media was unaltered and formed a circular band of tissue with no evidence of bulging opposite the intimal thickening (Fig. 4).

On the other hand, in the cases of chronic endarteritis in which a degenerative softening had taken place in the deep structures, the media was found to be involved to a considerable degree and showed distinct evidence of thinning. In these specimens the deep intimal degeneration was so closely involved with a degeneration in the inner layers of the media that these two portions were fused, making it appear that the thickening and degenerative process was situated in the intima alone. The media was obviously thinned opposite the degenerative process, but there was nothing in the remaining media to indicate a primary weakening or change in these muscle



FIG. 4.



FIG. 5.

FIG. 4. Female aged 53. No. 1 thoracic aorta. No. 2 abdominal aorta. Showing early endarteritis in the thoracic portion projecting into the lumen, also irregular lumen of extensive sclerosis of abdominal portion.

FIG. 5. Female aged 26. Thoracic aorta. Showing early endarteritis. Endarteritic areas project into lumen of vessel.

fibers which could secondarily induce intimal hyperplasia to excess with degeneration (Figs. 1 and 2).

By these same methods I also examined some vessels, particularly the iliac arteries, in which known lesions of the media were present. Some of these vessels showed typical Moenckeberg's arteriosclerosis with degeneration and calcification of the middle coat, while the