

to avoid medicine and work, and to live nutritiously. He made a second visit to that city in October, when, on comparing his person with a sketch taken at his previous visit, no change could be perceived. He then weighed 142 lbs. Since July, 1877, he has been free from cough, except for a couple of days together, and only after exposure; his breathing has improved, and œdema of feet and legs has continued stationary. Since the œdema first set in he has had to urinate eight to ten times during the day, and once during the night. His immediate family history is as follows: Both parents, four brothers, and four sisters, are alive, and with the exception of two of the latter, are all healthy. One sister has been the subject of some lung affection, and another is epileptic.

*June 11th, 1878.—Present Condition.*—Stature, 5 feet 9½ inches; weight, 150 lbs; fair complexion; pale; not badly nourished. Taking off his shirt, we note the following:—

*Inspection and Measurement.*—Notable deformity of thorax; left half larger and fuller than right, which is flattened and retracted; the right shoulder and nipple on lower level than the left; posterior border of right scapula projects, and dorsal spine presents a lateral curve, with the concavity to the right; semi-circular measurement a few inches below nipple—right side, 15½"; left, 17½"; at nipples, right, 15 6-8"; left, 17"; axilla, right, 15 6-8"; left, 16 1-8". Expansion of the entire right half of chest very deficient; that of left very marked.

*Percussion* elicits hyper-resonance over entire left chest—anteriorly, this note extends to right of mesian line as far as border of sternum; inferiorly, it coasts obliquely along close below left nipple, into lateral region, at level of 7th space; posteriorly, the left infra scap-region, over about 2½ inches vertically, emits a flat note. In the right infra clavicular and axillary regions resonance is of dull, hollow, almost amphoric quality, but below the level of, and corresponding accurately with, a horizontal line drawn around the chest from the 3rd intercostal space, the stroke sound is flat, and the resistance great over the rest of the entire right chest.

*Auscultation.*—Exaggerated respiration over left chest, with