

165, 150, 150; all of the latter with albuminuria, and three of them showing serious symptoms of failing compensation. Of the subnormals one was 85, recovering from acute endocarditis and pericarditis; one 95, compensation fair; one 100, active endocarditis.

*Myocarditis, 4 cases:*—One male, aged 60, pressure 80, heart sounds weak and irregular, moderate degree of arterio-sclerosis. One male, aged 57, pressure 115 the day before death. Post mortem, myocardial degeneration, no valvular disease, slight degree of mixed nephritis. One female, aged 48, pressure 125 two weeks before death. Post mortem, infarct in cardiac wall at apex of left ventricle, old thrombosis left ovarian vein, no valvular disease.

The presence of normal cardiac tension is therefore no criterion of cardiac adequacy. There can be normal tension with little or no reserve power.

*Hypertrophy and Dilatation of Heart of Unknown Causation, 2 cases:*—One male, aged 49, pressure 120 two weeks before death. Post mortem, heart greatly enlarged hypertrophied and dilated, no valvular disease, no macroscopic evidence of degeneration, no arterio-sclerosis, no nephritis. The other was a male, aged 43; pressure 110 a few days before death. Post mortem, heart 600 grammes, much hypertrophy and dilatation, no valvular disease, no macroscopic evidence of degeneration, no arterio-sclerosis, no nephritis. No toxic history in either of these cases.

*Aneurism, 3 cases:*—One of ascending aorta, 160 mm. in June, 1901; 125 in September, 1902; both hands equal. One involving arch and innominate (?) 120 in January, 1902; 105 in June same year. One of ascending aorta, 75 in right hand, 55 in left. Unfortunately this patient was seen only once and opportunity to verify this extraordinary reading did not occur.

*Acute Lobar Pneumonia, 18 cases:*—Here there was an average for the series of 92.7, being the lowest average for any group. Only one died, and this was a case of pneumonia in puerperal septicæmia, in whom a pressure of only 55 mm. was recorded 5 days before death. One case showed 122 on the fourth day, but went down to 75 on the eighth day; severe attack, recovery. P. A., middle aged man, gave 60 on the third day after the crisis and was still only 80 on the day of discharge, two weeks later. J. D., a tall muscular laborer, severe case, 110 on the eighth day, crisis on the ninth day, 120 on the twelfth day.