pressure in such cases has attracted my close attention. Observations on a good many cases has now proved that the systolic pressure may reach a level of from 270 to 300, while the diastolic may, at the same time and in the same individual, be as low as from 70 to 80 mm. Hg. This must be regarded as a most interesting fact, showing that the long interval of time following each ventricular contraction allows the high arterial pressure to fall to a low ebb before the succeeding systole occurs. It need scarcely be added that in such cases there is no aortic incompetence, nevertheless clinical investigation of the arterial pressure yields results singularly like what we are accustomed to observe in that condition.

We have in this chain of investigations a really interesting illustration of the gradual evolution of clinical knowledge, and we must now enter upon the successive steps by means of which the different facts have been subjected to analysis and synthesis.

All of us who have sat on the upper forms at school must remember that the great epic poet of Rome tells of the happiness of him who is able to discern the causes of what he sees. The investigation of a series of appearances such as those that have now received our attention has furnished abundant interest, and therefore happiness, for all of us who have worked at the subject. Some points were found to be easy of explanation; others much more difficult. We have not merely to exercise the imagination in the search for these causes, but we may even invade with caution the realm of speculation. It is a subject which allows opportunities to "spin the gossamer as well as forge the anchors of the mind." Our thoughts are not all endowed with the possibility of soaring to the very roof of heaven, but it is within the reach of us all to contribute what we can to the general advance, and some of the suggestions, as well as many of the observations, are due to men deeply engaged in the hard work of general practice.

Until the last quarter of the previous century the heart was considered to consist of what might be termed distinct compartments, absolutely separated from each other and not united by any continuity of muscle fibres. The first light borne in on the subject came from the investigations of Gaskell, who showed that there was a direct and continuous connexion of the sinus, the auricle, and the ventricle. It is exactly a quarter of a century since this great work made its appearance. Every succeeding observation has only served to prove more thoroughly the accuracy of the views which he then expressed, and to show the remarkable foresight which he manifested in his analysis of the various functions which he described. His investigations, in truth, have permitted the esoteric explanation of the condition at pre-