myocarditis. 4. The closing stage of chronic valvulitis, with extreme dilatation of the chambers. 5. Aneurysms of the aorta or its larger trunks, except in the incipient stage. 6. Any case in which the blood pressure was lowered by the balneological treatment. 7. Cases in which tenometric figure as low as 65 or 60 mm. of mercury was found. 8. Cases in which chronic bronchitis and asthma were well marked.

In October last, Dr. James D. Voorhees gave his experience with this contrivance to the New York Obstetrical Society. He says, for the purpose of starting labor, making stronger pains, and producing dilatation of the cervix, this rubber bag is more valuable than anything else. His present deductions are taken from a series of 200 deliveries in private practice and 4,272 at the Sloane Maternity.

Pleurisies: In the section on medicine at the last meeting of the British Medical Association, Dr. William Osler said that, clinically, three great groups of pleurisies may be recognized: (a) Pyogenic; (b) the metapneumonic, and (c) the tuberculous. In the absence of pneumonia or sepsis, the existence of an exudate is suspicious of tuberculosis; and for the past twenty-five years evidence has been accumulating that all cases of simple sero-fibrinous pleurisy are tuberculous.

The Dangers of the X-Ray:

Dr. Milton Franklin stated before the New York County Medical Association that a recent canvass of the practitioners employing the X-rays has failed to reveal a single serious result during recent times from the employment of the X-ray. Dr. Wm. B. Coley said at the same meeting that a great danger in treating malignant growths was necrobiosis of the tumor and its transference to other parts of the body.

Duodenal Ulcer: Mr. Mayo Robson stated before the Medical Society of London that he has operated on thirty cases of duodenal ulcer, about four of which were for perforation. He considers the leading symptoms are pain coming