

continuously. Chest measurement is equal on either side (15½ inches). There is no visible impulse, nor can the heart's beat be felt on palpation, unless the tip of the finger is pressed into the cicatrix of the incision wound. There is moderate hypertrophy, but none of the usual signs of adherent pericardium other than a slightly marked diastolic shock. The heart's sounds are normal, but somewhat frequent, averaging 85 beats per minute. Vocal fremitus is diminished in the lower half of left chest, as also are the respiratory sounds.

The number of recorded cases of suppurative pericarditis appears to be very limited, and especially so the number of cases in which the treatment by incision and drainage has been adopted.

A case was recently reported by Bohn (*Deutsch Med. Wochenschr*, Nov. 26, 1896) somewhat similar to the present one. It followed La Grippe and pleuro pneumonia. The pericardial sac was opened one month after the beginning of the disease, and over a litre of pus removed. He was unable to introduce a drainage tube, and had to drain with gauze. The sac was washed out with a solution of boracic acid. The opening in the pericardium closed in three weeks. Three months after the pericardiotomy the heart and lungs were in nearly a normal condition. He speaks of his as the fifteenth case on record. Eight of these recovered. Of the seven deaths one resulted from the irritation of the irrigating fluid; one from the degenerations of heart muscle; one had aural abrasions; the other from such complications as pneumonia, empyema and nephritis.

In the journal of the *American Medical Association*, June 26, 1897, Dr. Frank W. Garber, of Muskegon, Mich., reports a case of traumatic origin. Only about an ounce of pus was removed, the patient recovering. A *résumé* of the literature on the subject is given by him. It was in 1819 that pericardiotomy was first performed. He says Romero, of Barcelona, operated on two cases. Two recovered. In an article by Delorme and Mignon, *Revue de Chirurgie*, October, 1896, a *résumé* of which appears in the *Montreal Medical Journal*, April, 1896, it is stated that puncture of the pericardium was first proposed by Riolan in 1646.