

amputation above the ankle joint, where it was the antiseptic used. During the first few days the wound was aseptic, but it afterwards became septic; this change was due to carelessness in applying the dressings, and not to any failure of the peroxide as an antiseptic. In a case of elbow excision in a boy, I saw, during the operation, its styptic properties tested, and in the subsequent dressings, its antiseptic qualities. It withstood both tests. It is a good dressing for syphilitic ulcerations. The method of employing it is simply to apply cotton wool, holding it in suspension to the wounded surface, and over this a layer of dry wool. I believe that the ophthalmic surgeons find it an excellent remedy for all forms of purulent conjunctivitis.

*Acute Dilatation of the Heart.*—It has only recently been recognized that during the often slow progress of organic disease of the heart, one or all of its cavities may become suddenly dilated. That this may happen even in those cases where the patient was previously unaware of any cardiac trouble, the following case shows. A woman, aged 23, was admitted into Schrötter's wards, on the 13th of November, complaining of violent palpitation of the heart. With the exception of being pale-faced, and troubled with slight palpitation on exertion, she enjoyed good health until fourteen days ago, when her heart commenced to beat with great rapidity. When examined on Nov. 14th, a pulsation visible at a distance of several feet, was noticed. It extended from the 3rd to the 6th ribs. The apex beat was half an inch to the outside of the nipple, and well marked. A distinct presystolic thrill could be plainly felt on laying the hand over the heart. The vertical dullness extended from the lower border of the 2nd rib, and the transverse from the right edge of the sternum to just outside the nipple line. Two murmurs were audible at the apex, differing greatly in acoustic properties—one presystolic, being soft and musical; the other systolic, loud and rough. In addition, there was heard in the aortic area two independent murmurs, one systolic and the other diastolic. The 2nd pulmonary sound was accentuated. Forty-eight hours after the above examination, another was made, and it was found that the cardiac dullness was less by two finger-