was attached, who had frequent attacks of hemorrhage during the past thirteen or fourteen years, gave him great anxiety at times. This, in addition to business cares and worries, to which he had been subjected, more or less, were the only factors which could be made out as bearing on the case. He was a man of powerful build, medium height, and forty years old. In closely questioning his wife, she said she had sometimes noticed a dark red discoloration of his ears, finger nails and back of neck, but it always passed off.

REPORT OF AUTOPSY.

Autopsy, April 24, 1892, twelve hours after death. Body well nourished and muscular. Rigor mortis well marked. A considerable amount of yellow fat in subcutaneous tissues and omentum. The fat is increased to a moderate extent on the surface of the heart. The organ is of normal size. The right side contains a considerable amount of dark colored fluid blood; the left, a small quantity only. A small dense fibroid patch is present on the ventricular septum just below the aortic valve. This patch is irregular in outline, about half an inch in diameter, and extends irregularly into the wall of the septum to about half its depth. The mitral valve presents slight fibroid thickening on its auricular aspect, and there are a couple of small yellow plaques on the anterior cusp. The orifice of the left coronary artery is slightly narrowed, and on dissection both coronary arteries are thickened and their lumens narrowed by numerous yellow plaques throughout their whole extent. The branch running in the anterior inter-ventricular groove is almost obliterated near its origin, and just below the fibroid patch already referred to. The arch and descending aorta present a number of small yellow raised plaques, and these extend into the great branches of the arch and to the iliac arteries. The weight of the heart is 260 grams.

The left pleural cavity is obliterated by organized adhesions, which are readily broken down. Both lungs are hyperæmic and œdematous. The abdominal organs are normal. (The left testicle is considerably smaller and the right rather larger than normal.) The brain was not examined.

Microscopically the fibroid patch in the heart is mostly composed of a granular looking structureless tissue, with a small quantity of fibrous tissue, but no small round cells. The arterioles of the liver and kidney are normal. The renal artery showed distinct endarteritis.

Atheroma, arterio-sclerosis, or endarteritis deformans was first conceived as an independent affection by Messrs. Gull and Sutton.

Atheroma, a term meaning pap or pulp, is described as a variety of fatty degeneration, affecting especially the large arteries and valves of the heart. The disease is important as leading to certain grave accidents and lesions pertaining to the parts affected. It consists primarily of a deposit beneath the lining membrane of the arteries, or the endocardium investing the valves of the heart, of a substance which presents a yellowish or whitish color and is of a cheesy consistence. Microscopically it is composed of fatty granules, with crystals of cholesterin in abundance and certain earthy ingredients (Flint). The disease presents three tolerably well defined stages: (Little) (*a*) In the first stage we notice, when the vessel is slit open, greyish patches by which the membrane is irregularly thickened; these patches seem to lie on the surface of the membrane, but this is deceptive, the endothelium lies between them and the blood stream, and is, at least at the beginning of the morbid process, unaffected. The material of which the