

insufficiency with imperfect and ineffective contractions leading finally to asystole and death. Leyden has recently written upon this subject, and an abstract of his views will be found in our Reports on Progress, in the *American Journal of Medical Sciences* for Oct. 1886.

---

The term *spurius*, used now in connection with traumatic aneurism, has also been applied to those instances of dilatation and pulsation of larger vessels which not infrequently simulate aneurism so closely that the greatest caution must be exercised to avoid error. The words 'mimic' and 'phantom' define even better, and with less confusion, the same condition. It is met with particularly in the abdominal aorta, and it is not too much to say that for one true aneurism of this vessel there are twenty or more instances of mimic dilatation. In neurotic, hysterical women, the condition is extremely common, and in anæmic, debilitated states, the throbbing may be so extreme, that when a murmur co-exists it is really difficult to decide. In the absence of a positive, *expansile* tumor, which can be grasped, the diagnosis of abdominal aneurism is always doubtful. In the March number I reported a series of cases of duodenal ulcer, one of which (case IX) illustrated this point. There were pulsations even strong enough to shake the bed, a well-marked bruit, and severe pains—but no aneurism. Dr. Samuel West has written on the mimic subclavian aneurisms in Vol. XVI of St. Bartholomew's Hospital Reports. It is less common in the innominate artery. Some months ago a young girl, aged 21 or 22, was sent to my clinic with signs of aortic insufficiency and dilatation and hypertrophy of the heart. The pulsation in the carotid vessels was very strong and above the sterno-clavicular articulation the dilated innominate could be distinctly seen, and felt as a tumor which did not entirely disappear during diastole. There was dulness beneath the articulation and the manubrium, extending also a little to the right. Evidently there was dilatation of the vessel, but was it truly aneurismal? The existence of aortic insufficiency, in which we have such remarkable systolic dilatation of the aorta and its branches, and