

York, for the purpose of undergoing the operation of the ligature of the arteria innominata, which was deemed feasible by some of his medical attendants. He seemed to be perfectly aware of the nature of his disease, and its several modes of cure, and expressed himself as willing to undergo any operation for its removal.

On a physical examination of the chest, a very apparent fullness, with corresponding dullness, was perceptible, extending from beneath the right sterno-clavicular articulation to below the second rib and towards the mesial line. The superficial veins in this region, and on the corresponding side of neck and arm, were tortuous, enlarged, and congested. The face, especially on the right side, was puffed out. The action of the heart was natural, its impulse below the præcordial region was feeble, but a strong jarring impulse was communicated to the ear when the stethoscope was applied to the upper part of sternum, where a distinct *bruit de soufflet* was audible, extending from the arch of the aorta to both carotids. This was synchronous with both sounds of the heart; it could also be heard in the portion of chest between the post. supr. angle of scapula and the spinal column. There was a marked difference between the pulses in both wrists,—that in the left it could scarcely be felt. The respiratory murmur in both lungs,—both anteriorly and posteriorly, was natural. The peculiar purring thrill of aneurism was very plain, on placing the hand over the right sterno-clavicular articulation. Carefully considering the signs and symptoms of the case, the diagnosis lay between an aneurismal swelling of the arch of aorta or arteria innominata,—the preference was given to the latter; consequently I strongly endeavoured to dissuade him from his purpose, and recommended him occasional small bleedings, absolute rest, low diet, and small doses of hydrocyanic acid, and digitalis in camphor mixture, with acetate of morphine at night. I lost sight of him until the middle of November, when he sent for me. A considerable change had in the mean time taken place in the features of the case. The previous symptoms all existed, but in an aggravated form; and in addition there was evident fulness perceptible in the antr. infr. triangle of the right side of the neck, immediately above the sterno-clavicular articulation, which was bulging forward. On pressing downwards and backwards with the points of two fingers, the apex of a round solid tumour was distinctly felt, being still more apparent when compared with the corresponding situation on the opposite side; it also gave him great pain. The varicose condition of the cervical vein was also much increased; the tracheal respiration and deglutition were daily becoming more distressing; he was unable to lie down at night; and could not obtain any rest without the aid of the strongest opiates. He informed me that he had gone to New York, but that Mr. Mott had given him but little encouragement. When returning he had been very sick on board one of the steamers on Lake Erie,