gives the total incidence of the defect, which is thus shown in the last column of the chart.

The result of this analysis brings out some remarkable facts, several of which are at variance with accepted ideas. The following points are of especial interest:

1. The frequency of defects of the interventricular septum. — While relatively rare alone (thirty-two defects at the base among the four hundred), in combination with other conditions this is seen to be the most common of all cardiac anomalies (one hundred and forty nine among the four hundred cases); next in frequency comes patent foramen ovale, under which are included only cases of true patency, not simply a valvular or slit-like condition, with one hundred and thirty-four cases, and then patent ductus arteriosus with one hundred and six. The frequency of transposition of the arterial trunks (forty-six cases) and of pulmonary stenosis with defect of the interventricular septum (seventy-three cases) is noteworthy, while pulmonary stenosis with closed interventricular septum is relatively infrequent (seventeen cases).

2. The duration of life is seen to be relatively long in uncomplicated defects of the interanricular septum, patent ductus arteriosus, coarctation of the aorta, and pulmonary stenosis with closed interventricular septum. In pulmonary stenosis with defect of this septum the duration of life is seen to be much shorter.

3. Patency of the ductus arteriosus is seen to be rare in pulmonary stenosis, though very frequent in pulmonary atresia.

4. The right chambers chiefly are hypertrophied and dilated in defects of the interanticular septum, transposition of the arterial trunks, pulmonary stenosis and atresia. Both chambers, but chiefly the right, are enlarged in defects of the interventricular septum and patent ductus arteriosus, the left ventricle chiefly in coarctation of the aorta.

3. Acute endocarditis is seen to be relatively common in