

aortic valves, while in the pulmonary semi-lunar they occurred in only 7 per cent. They are either congenital or result from atrophy, and have no pathological difference.

ARTERIES.

Atheroma.—In twenty-three cases the aorta presented signs of degeneration, usually slight in amount. In five instances was the arch dilated and atheromatous condition very marked.

ANEURISM.

CASE XXXVI. — *Aneurism of commencement of Thoracic aorta, unsuspected during life. Death from general Tuberculosis.*

A. B., æt. 32, a well-built muscular man. The aorta presents at the arch several calcareous plates and patches of atheroma. A large aneurism, the size of the fist, found just below the termination of the arch. It contains numerous fibrinous laminæ. The posterior wall of the sac is formed by the 3rd, 4th and 5th dorsal vertebræ, which are bare, and the intervertebral cartilages much eroded.

Left ventricle hypertrophied; valves of the heart normal. The lungs stuffed with recent tubercles, and at the apices small caseous masses. An interesting fact is that so far as could be ascertained this patient had never suffered from any symptoms of aneurism.

CASE LXIX. — *Sacculated aneurism of ascending portion of arch of aorta. Rupture into the right pleural sac.*

J. C., æt. 40, a well-built muscular man. A little to the right of the middle of the sternum is an irregular oval swelling. On opening the thorax the cartilages of the 3rd, 4th, and 5th ribs on the right side with the corresponding portion of the sternum are found much eroded, the 3rd cartilage having almost entirely disappeared. The sac of the aneurism lies immediately beneath the sternum, which, with the above-named cartilages formed its anterior wall, (see below). It projects towards the right side and contains externally old laminated clots and dark fresh ones within. The mass removed from the sac filled the two hands.