

notice, would patiently investigate the subject with the aid of that valuable instrument, that the darkness and uncertainty which now surrounds it, would soon pass away. As it is now, we have to go back to the year 1799, since which time but little advance has been made in our knowledge of this disease. In that year Dr. Parry, a member of this Society, published a work, entitled "An enquiry into the symptoms and causes of Scyncope Anginosa," and to this day, it is most unquestionably the best monograph that we possess on the subject, and the theory then advanced by him I will presently attempt to show is the one most supported by pathological observation. One fact concerning the disease we may however take as established, and that is true "Angina" never occurs without organic disease of the heart or arteries in its vicinity. It is true, cases are recorded in which no traces of organic disease were observed. Concerning such cases Dr. Stokes (and I can but believe he is correct) says: "It is more probable that in the cases so described, the disease was overlooked: than that the heart was perfectly sound." He then goes on to say, "that such cases as were observed before the application of the microscope to pathological anatomy may be set aside, as proving the existence of "Angina" without organic change; for among the most important uses of histological research, is the discovery of those early stages of organic change, which escape the unassisted eye." Dr. Walshe on the same subject says, "It has occurred to me to examine during life some six or eight cases of true "Angina"; in every one there were signs of organic disease. I have opened or seen opened the bodies of three persons destroyed in the paroxysms; the heart was texturally affected in all." The form of organic disease present as enumerated by Latham are as follows:—1st. Weakness and attenuation; 2nd. Weakness with fatty degeneration; 3rd. Some form of valvular disease, generally affecting the left side; 4th. Disease of the aorta with or without obstruction of the coronary arteries. If we analyze closely the various cases which have been recorded it will be found that in the great majority of instances, the organic disease present was weakness with attenuation of the walls of the heart or weakness with fatty degeneration, the coronary arteries as a rule being ossified (and as in the case detailed, the ossification extending frequently to the aorta and valves) and if not truly in an ossified condition, at least a cartilagenous formation being found in their interior. If the coronary arteries are found in the condition I have just named, it need not I think excite our amazement, if we find the heart itself in a weakened condition; for just in proportion as these arteries vary from their normal state will the nutrition of the heart be impaired. If the calibre of the artery is in the slightest degree diminished, the required amount of blood will not reach the great arterial centre, the result being a weakening of the muscular fibres. I believe, then, that as a general rule in all true cases of "Angina Pectoris," the coronary arteries will be found diseased. Having made this strong assertion, it may surprise the members of this Society somewhat, that in the case which came under my care not one word about the coronary arteries appears in the post mortem examination. You cannot regret it more that I do, but it could not be avoided. It was with great difficulty that I succeeded in getting the friends to consent to such an examination, and before it was completed to our satisfaction, the friends