

row band of lung-liver relative dullness. The size of the liver is of no material importance. Two factors compose the differential sign—the position of the liver and the presence and position of the diminished area of lung-liver relative dullness. Of these the position of the liver is most important.—*Medical Record*.

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### **Pseudoapical Murmurs**

Allard (*Berliner klinische Wochenschrift*) writes very briefly upon this very important subject, which is so deeply concerned with hasty diagnosis of incipient pulmonary tuberculosis. The author is a member of Prof. Minkowski's staff at the Breslau University Medical Clinic. Given that we obtain in a particular case auscultatory and percutory evidences of incipient phthisis, the question which arises concerns the negative interpretation of the phenomena. No doubt many murmurs heard in these examinations are extrapulmonary and due to contractions of the trapezius, scaleni, etc. Such auscultatory illusions should be corrected by percutory evidence. But all such sounds are not muscular in origin; for in some cases there is evidence that they proceed from a sort of creaking of the bones and joints. The late Dr. Rosenbach was active in this diagnostic field and laid down rules for distinguishing between pulmonary râles and muscular sounds. But the very pains he took with this subject illustrate its intrinsic difficulties. He, as well as others—including the author—sought to exclude muscular participation by a system of "holding" during which auscultation of the apices was being undertaken. No doubt in all routine examinations much can be effected by placing all the muscles concerned in a state of repose.—*Medical Record*.