

a few hours. By the friends her death was attributed largely to the hypodermic injection I had given, and I received considerable discredit. In thinking about her case afterwards, and wondering how I had let her slip out of my hands, I recollected noticing that she had marked tracheal breathing, but did not at the time attribute any particular importance to it. This death occurred about six years ago, and was, I think, the first to impress upon my mind the importance of this sign.

2. A man about seventy years of age, suffering from heart disease, had been under my observation for a couple of years, during which time he had several severe attacks of dyspnea, cyanosis, dropsy and other symptoms due to lack of compensation. An enlarged prostate, necessitating the use of the catheter, which set up cystitis, complicated the case. While I was absent from home on a vacation he became very bad. The physician who was looking after my practice thought he was so bad that he said he could not recover, and that it was no use going to see him any more. When I reached home the friends sent for me, and I felt very much like agreeing with the other doctor. He was in a partial comatose state, pulse very slow, breathing of the Cheyne-Stokes type. However, as I had seen him recover from some very bad attacks before, and as the larynx did not move up and down during respiration, I ventured to hold out some hopes. He recovered from this attack, and was able to go about some. In about three months he had another attack. In a few days tracheal breathing developed, and after this he died in about thirty-six hours.

3. A man about forty-two years of age, who had been troubled with dyspeptic symptoms for years, was suddenly seized with severe pain in the right hypochondrium, and vomiting. I was not able to make a positive diagnosis, but thought it was probably a case of peritonitis, due to perforation of a duodenal ulcer. Although it was recognized by me as a serious case, and consultation was requested, the man himself did not think he was very bad. His mind was perfectly clear, and he refused to believe he would die until an hour or two before his death. Well-marked tracheal breathing was noticed three days before the fatal termination.

4. A man about fifty-seven years of age, who had previously always been healthy, had been suffering from cough and what he thought was the grippe for more than a week. On a Thursday he was taken with a chill, and I saw him on the following Monday. This was his first day in bed. He had considerable