

at an early stage an absolute cure is possible; and though complete restoration of the damaged gland, in more advanced cases, cannot always be promised, yet an arrest of the morbid process may be looked for and the remaining portion of the pancreas will be able to carry on the metabolic, even if incompletely, the digestive functions of the gland.

ARTERIO-SCLEROSIS, INCLUDING ITS CARDIAC FORM. By Dr. H. Huchard, Paris.

The chief points of Dr. Huchard's argument were the following. There exists great confusion amongst pathologists as to the nature and process of arterio-sclerosis, more than twenty different accounts of it having been advanced, so that it is impossible to give an exact and rational definition of the disorder from the pathological side. Neither can pure experiment settle the question, but the clinical evolution of arterio-sclerosis affords the method of distinguishing between that disease and atheroma. Atheroma is really a senile affection, coming on in persons of from 60 to 80 years of age, and it is entirely a vascular change. Arterio-sclerosis, on the other hand, attacks persons between 30 and 60 years of age and is so largely a visceral complaint that its best name is arterio-visceral sclerosis. Gull's and Sutton's conception of an "arterio-capillary fibrosis" is incomplete. There are some arterio-scleroses at their outset typically aortic and which may be called myo-valvular. In spite of the subsequent involvement of the smaller vessels and the arterioles, from the clinical point of view these processes at the first and during the greater part of their course affect the aorta and the valvular parts of the heart. From the triple viewpoint of the pathologist, the clinician, and the therapist, the distinction between such endocardial valvular "cardiopathies" and the endarterial "cardiopathies" is of considerable importance. The principal causes of the latter condition are gout and "uricemia," lead poisoning, syphilis, faulty diet, tobacco, mental strain, and overwork. There are four stages recognized clinically in the evolution of arterio-sclerosis: (1) arterial presclerosis; (2) the cardio-arterial stage; (3) the mitro-arterial stage; and (4) the final stage of cardiac failure. The symptoms fall under the three heads toxic (the predominant group), cardio-arterial, and renal, and each requires a special line of treatment. The beginning, the course, and the climax of the arterial cardiopathies are comprised in the word intoxication, having for its chief symptom dyspnea. There is good clinical evidence of the reality of the condition called presclerosis in which there are either no vascular lesions or those