by the 5th and 6th ribs now consists of a soft unresisting cushion formed by the 4th, 5th and 6th intercostal spaces and the sites of the removed ribs. The palpating hand finds little thoracic concussion, but the powerful throb of cardiac systole into the yielding covering of the heart. The other physical signs remain as before, but the exaggeration of carotid and suprasternal pulsation is less marked and the blood pressure registered is from 120 to 130, and at times as low as 115. The apical presystolic rumble is not to be heard. The only palpable thrill is basic (aortic) and diastolic in time."

Two months after operation, the patient stated that he was able to get about "quite well," and that he had not experienced his present condition of thoracic comfort since childhood. He had also increased five pounds in weight since leaving hospital. The diminution in his anginal pain had been most gratifying; the frequency of the attacks and the degree of pain had both greatly diminished.

The author reproduces blood pressure records and sphygmograms, showing the beneficial effect of the operation. "The operation," he remarks, "does not seem to have reduced his normal blood pressure, but to have greatly modified the tendency to an erythetic rise of it. This can only be from the removal of some physical as distinguished from emotional incentive to erythism, and that incentive we are surely justified in regarding as the osseous provocation to cardiac stimulation removed by thoracostomy.

"We may, therefore, without any undue exercise of the imagination, conclude that one cause, at least contributory, to attacks of angina in aortic valvular disease with hypertrophied heart is direct stimulation of the organ by systolic impact against costal resistance, and this may also be regarded as a cause of the premature failure of the hypertrophied heart so frequently observed in practice."

MEDICINE.

UNDER THE CHARGE OF DRS. FINLEY, LAFLEUR, HAMILTON, AND HOWARD.

FLEXNER AND JOBLING. "An Analysis of Four Hundred Cases of Epidemic Meningitis treated with the Anti-Meningitis Serum." Journal of Exp. Med., Sept., 1908.

The cases analysed have been collected from a number of different observers in Great Britain, the United States and Canada. The results obtained strongly support the contention of the writers of this article, that the serum treatment greatly lessens the mortality of the disease