On this 18th day, at 6 a.m., the nurse took the temperature as usual, and found it 100°. Half an hour later, noting a great change in the patient, the temperature was again taken and found to be but 98°. The patient was then extremely pale, as though blanched by a hæmorrhage; the pulse about 150 and very weak; the face and extremities cold, and bathed by a profuse cold perspiration. Hæmorrhage being at once thought of, the usual remedies were applied.

By noon the extremities were warmer, and the pulse, although still weak and fast, somewhat stronger.

From this time on to the 28th day (ten days), the patient steadily grew stronger; a slight degree of color returned to the cheeks; appetite was returning, and the temperature had been normal for five days.

The bowels still moved only by enemata, and a close watch was kept on the stools for signs of hæmorrhage; but none appeared, although three large motions had been passed in the interval.

But on this 28th day a fresh syncopal attack occurred. At 7.30 p.m., just after having been made comfortable in bed for the night, which process necessitated a certain amount of disturbance to the patient, she again became suddenly faint, very pale, broke out into a profuse perspiration, and pulse became rapid and feeble. In fact, the pulse was so feeble that the stethescope was applied over the heart to get the rate. There was then heard over the left ventricle, at the apex, and propagated into the axilla, a loud blowing systolic murmur. Examination failed to find any cardiac enlargement.

Hot applications were applied and stimulants ordered.

Two days afterwards she was much stronger. The murmur, as above noted, still persisted, and in addition a loud systolic murmur was heard at the aortic cartilage, propagated upwards along the vessels of the neck, and also heard across the upper part of the chest, from the aortic cartilage to the left axilla. A slight trace of blood was seen in a stool passed this day, which was the only blood passed throughout the case.

Ten days afterwards the patient had so advanced in convalescence that she was out of bed every afternoon. At this time the murmur could not be heard at the apex at all.

A week later, two days before her discharge, the note in the