

Lungs crepitant. Bronchi contain thick mucus. On slitting up pulmonary arteries, the middle sized branches found to be stuffed with lumpy gray rounded fibrinous masses. A large smooth rounded clot lies just beyond bifurcation. None of the masses adherent. Right lung in same condition, the obstructions being chiefly in the larger branches of the pulmonary artery. Spleen large and soft, 250 g. Kidneys together weigh 450 grammes. Uterus projects above brim of pelvis. Length 12 cm., from fundus to internal os. Placental site anterior, covered by a thick grayish diphtheritic looking membrane. Slight fetor. A few old erosions about cervix. Left ovary contains a corpus luteum 8 mm. in diameter. Pelvic and uterine veins free from thrombosis, as are also the iliac and femoral veins. In right saphena vein a soft grayish red adherent thrombus. Brain normal. Other organs normal.

A point of interest in this case was the source of the embolus in the saphena vein and not in the pelvic veins.

HEART DISEASE (3 CASES).

CASE 70.—J. aet. 50, and dropped dead while sitting at work on an office stool. Said to have fallen with his face against a sharp piece of wood. Had been under treatment for the past 2 years for eczema by a physician of excellent standing who stated that he was ready to certify death as being due to heart disease, as he knew him to be suffering from aortic regurgitation. Recently the deceased had suffered from shortness of breath and precordial oppression. Inquest held July 18th, 1893.

External Examination.—An irregular laceration 1 inch long and 1 inch deep beneath left malar process. No cedema. Precordial dulness not increased.

Conclusions.—The external examination does not show the cause of death.

CASE 38.—S. D., aged 51. Had suffered from acute rheumatism when a young man. Lately very short of breath, obliged to sit up at night owing to a feeling of suffocation. Had a cough. The day previous to death dyspnoea was very severe. Died during the early morning.

External Examination.—Finger ends clubbed, and nails incurvated. (Edema of both feet and ankles, none of face.

Conclusions.—The body shows marked evidences of chronic interference with the circulation, probably from heart disease.

In this case the external evidence of serious organic disease present, combined with the history, left little doubt as to the cause of death.

CASE 77.—Mrs. G., aged 40. Found dead in bed. Had been in poor health for some time and was short of breath. Habits intemperate (?)

Autopsy.—July 15th, 1893. No signs of injury. Subcutaneous fat abundant. Heart larger than normal, chambers distended with blood. Left ventricle shows an extreme degree of hypertrophy and dilatation. Aortic and mitral valves show extensive fibroid changes. The middle and right aortic segments are fixed and perfectly rigid, being evidently incompetent. On the ventricular surface of the mitral valve just