

internal and external surfaces, so as to change materially the character or constitution of the sanguine vital fluid. The red globules can move only from the pressure of the watery element, the vehicle which gives them mobility. The loss of this tends to the general stasis of the circulation that is to be observed in every portion of the structure. The internal capillaries exhibit a condition the reverse of the preceding. The blood that has abandoned the exterior is precipitated into the tissues of the interior, is accumulated and detained in them, forming an extensive congestion with hemastasis or stagnation of the blood. An examination of the interior surfaces open to inspection, demonstrates this state to exist. By turning down the lower lip, exposing its inner surface, the vessels, capillaries, and the whole tissue are seen injected with blood in the most beautiful manner. In the advanced period, or collapse, it has the appearance of a fine size injected preparation, and when pressed on with force by the finger, the blood is not *displaced*—the stasis is complete.

The respiratory organs in this stage, do not present aberrations strikingly indicative of their pathological condition. The huskiness or thickness of the voice, resembling that caused by a slight cold, and the anhelation with a sense of oppression in the chest, arise from a commencing alteration in the laryngeal, tracheal, and bronchial mucous membrane, and probably a disorder in the functions of the pneumogastric and thoracic ganglia. The natural secretion of mucus, lubricating, and softening the membrane, and fitting it for its various offices, is arrested. Its circulation is becoming embarrassed and congested, of which the aspect of the labial surface and gums is an indication and evidence. From this state of the mucous membrane, the voice is affected somewhat as it is from an analogous condition in irritation of this tissue from cold. The function of respiration, attached to the bronchial mucous membrane, is necessarily affected by the stasis or remora which occurs in its circulation and its power of transmitting the blood. Hence the feeling of sense of suffocation, of the want of air, a feeling always called into existence whenever the mass of the blood, from any cause whatever, does not undergo the changes essential to its constitution, by an exposure to the air in the lungs. The difficulty experienced in the circulation of this membrane, resists and prevents the passage of the blood from the heart, and that fluid accumulates in the pulmonic ventricle and auricle, and the venous system generally. This is the correct explanation of the anhelation and oppressed breathing, the anxiety and sense of suffocation experienced by the patient; it is from this cause also that proceeds the præcordial anguish so often endured by the sufferer from this disease, and the accumulation of blood found after death in the right or pulmonic cavities of the heart and general venous system.

That the above symptoms depend on the causes assigned, and are not connected with a congestion of blood in the lungs is evident. 1st, The chest when percussed is resonant; 2d, examined with the stethoscope, the respiration is clear, distinct, and uninterrupted; 3d, after death when the chest is opened, the lungs collapse, or if