

When, however, the narrowing is great, it has an unfavorable effect in regurgitation.

The comparative prognosis of the different valvular lesions is difficult to estimate, as it depends so much upon other conditions. It may be stated in general terms that the following is the grade of gravity : tricuspid insufficiency, aortic insufficiency, mitral stenosis, aortic stenosis, and mitral insufficiency. Tricuspid regurgitation is a severe lesion, as it is the result of serious changes in the mitral and aortic valves. When it occurs as an independent disease it is also of serious import, because the walls of the right ventricle do not undergo compensative hypertrophy in the same way as the left. When aortic disease results from syphilis the prognosis, so far as my experience goes, is unfavorable. Such cases are frequently complicated with aneurism. They are not much influenced by anti-syphilitic remedies.

Aortic insufficiency is less dangerous when it comes on in early adult life because compensatory hypertrophy takes place more readily than in later years. The writer had for many years under observation a patient suffering from aortic insufficiency with a very much enlarged heart, in whom the condition followed rheumatism when the patient was twenty years of age. He died at sixty-five of Bright's disease and arterial sclerosis. The long life of the patient was largely due to his habits and mode of life. He held a government position which required short hours and light work. At the same time, it must be stated, that he had at times epileptic seizures and was subject to violent attacks of passion. The presence or absence of giddiness and fainting should influence the prognosis.

Although we may obtain many facts which may assist in prognosis from physical examination of the heart, we should never rely upon them alone, but should take into consideration not only the history of the origin of the disease but also the length of time it has been in existence. The changes which have taken place in the heart, as well as in other organs of the body, should be carefully investigated. During childhood and early adult life, as previously stated, valvular lesions are generally the result of inflammation, and the prognosis is more favorable than in those which occur after middle life, which are often caused by degeneration when the recuperative power of the heart is much diminished. The presence of lesion, of two sets of valves, of course, increases the gravity of the case. Cases have been recorded of patients living many years suffering from double lesions.

The length of time which the lesion has existed is of great im-