

murmur audible, extending from the base of the heart to the aorta, through a considerable portion of which it was traced. Posteriorly, no particular dulness could be defined, although, on auscultation, a double murmur was traced and audible over the left back, and most distinct between the vertebræ and edge of the left scapula. On auscultation over the lungs, occasional sonorous râles were observable, with a moderate degree of prolonged expiration. At times a slight cough and limited expectoration of mucus, but never tinged with blood. No appreciable difference in either pulse. Occasional slight inequality of the pupils, not, however, continuous or determined in character, but sufficiently so to suggest the existence of aortic disease from the apparently moderate implication of the sympathetic and recurrent laryngeal nerves, resulting in local irritation and iritic irregularity. Digestive, urinary and other functions tolerably good. He was recommended to take moderate exercise, to occupy his office only a few hours each day, to take light nourishing diet, and to avoid excitement and over-exertion, but to continue the free use of the iodides. By strict adherence to this plan of treatment, his general health improved for a time. The disease, however, made slow, but gradual progress, the period occupied from first to last of his illness being about four and a-half years, the symptoms varying in intensity and in proportion to the existing abnormality, and yet with a remarkable degree of accommodation to the surrounding diseased condition. Never had any dropsical state whatever. For eighteen months prior to death was subject to paroxysmal cough, associated with shortness of breath and, at times, a feeling of suffocation. Sleep usually composed. Mental excitement tended to increase the pulmonary difficulty, causing pain in the chest almost like angina pectoris. No difficulty in swallowing, and loss of flesh was not marked. Within a short period of his death, would have passed for a person in ordinary health but for the swelling on right chest, which could readily be observed through the clothing. The tumor externally was hemispherical in shape, extending from near the right clavicle to about the 6th rib, and laterally occupying the space from the right nipple to within two and a-half inches