

Delorme and Mignon have collected 102 cases; 61 died; 82 were punctured, with a mortality of 65 per cent., and 18 incisions with 38 per cent. mortality.

A case is recently reported by Menetrier and Reneau, of purulent pericarditis due to the pneumococcus, where pneumonia was not present, and where a primary pericarditis was suspected. The autopsy revealed only bronchitis the primary source, then an enlarged mediastinal gland, from which the pericardium received the infection.

One of the most recent contributions on this subject is the paper by J. B. Roberts, A.M., M.D., Philadelphia, which was read at the meeting of the American Surgical Association, May, 1897, which should be read by all surgeons contemplating this operation (published in the December No., 1897, *American Journal of the Medical Sciences*). The author considers it mostly from the point of view of its surgical treatment. He strongly advocates incision in all cases of pyopericardium, and, even where the effusion is serous, most cases should be treated preferably by incision rather than cardiocentesis.

He says it establishes diagnosis in dubious cases, avoids cardiac injury, saves the pleura from puncture, affords complete evacuation of effusion, permits extraction of thick pus and membranous lymph, and gives opportunity for disinfection of the sac when that is necessary.

In most of the methods of operation hitherto employed there is danger of wounding the pleura by the puncturing needle. Hence, Dr. Roberts advises exploring through the upper part of the left xyphoid fossa, and if pus is found, to incise the pericardium after resecting the 4th and 5th costal cartilage on the left side; a sort of trap door is made and turned upwards utilizing as a hinge the soft tissue in the third intercostal space.

Dr. Roberts gives a classification of thirty-five cases on record of incision of the pericardium, with operator's name and results. The following is a *résumé* of it: Hilsmann, 1844, recovery; Langenbec, 1850, recovery; Rosenstein, 1879, recovery; West, 1882, recovery; Partzevsky, 1882, death; West, 1883, death; Savory, 1883, death; Scott, 1883, recovery; New-