Entomophobia with obsessions is a much milder form of mental affection. It is frequently a sequel of scabies, and according to my experience is very common. When following scabies, acarophobia would be an appropriate name. The patients have no fixed delusions, but ideas that they are infected by itch are continually forcing themselves into their consciousness, which, however, they recognize as morbid, and try to correct them.

Pruritus is always present and probably in most cases is partly caused by organic changes in the skin which have resulted from treatment. However, in all the cases, psychic disturbance either gives rise to or aggravates the itching. The probable explanation of this is that the images in the perceptive centres formed during the attack of scabies in some way reveal themselves by external projections.

The affection is curable. In the treatment, antiprurities are useful, but psychotherapeutic methods are most potent measures. An authoritative statement that the patient has not the itch always does much good.

HEART-BLOCK.

The term heart-block is applied to a pathological condition in which the passage of impulses from the auricles to the ventricles is obstructed, so that the automatic mechanism of the cardiac contractions is disturbed, and in place of being equal number beats of auricle and ventricle there may be two or more contractions of the auricle for each beat of the ventricle. The results of the blocking of the impulse is to diminish the frequency of the pulse, so that bradycardia is a very common manifestation of the condition.

Gaskell, in 1883, was the first to make use of the term heartblock. He, experimenting on the heart of a tortoise, found that by compressing the heart at the auricular-ventricular groove by means of a clamp, that he could change the normal ratio of auricular and ventricular beats from one to one to two or more to one. From his experiments he came to the conclusion that stimuli were conducted from one part of the heart to another by muscles, but with this myogenic theory he was unable to explain how the stimulus was conducted from auricle to ventricle. This view of Gaskell receives much support from many physiologists, but for the following twenty years no one solved his difficulty, until, in 1903, His, Jr., dissected out a bundle of muscle fibres connecting the auricles to the two ventricles. The auricular end of this band begins near the coronary sinus and passes in the auricular