

Case of Aneurism of the Thoracic Aorta.—Under the care of
DR. REDDY. Reported by W. R. SUTHERLAND.

P. P., aged 48, of Irish descent, unmarried man, of medium height, strong and muscular, was admitted into the Montreal General Hospital on the 19th April, 1878, complaining of short breath and constant cough (which has a peculiar ring), with pain in right shoulder, side of neck and crown of the head. Pain is much aggravated on attempting to lie down, and a sense of choking comes on so that he has to be propped up in bed.

He expectorates large quantities of thin, frothy mucous, with purulent patches through it. Dyspnœa is not worse after exertion; appetite good; voice somewhat hoarse.

Family history obscure; but, as far as can be made out, it is good.

He has never had syphilis, nor any other disease of any consequence. Was a soldier for twelve (12) years, during which time he saw active service and endured severe hardships. Since his discharge from the army, has been a policeman, porter, and, for the past ten (10) years, caretaker of the armory. Has been a man of regular habits, and enjoyed good health up to January, 1877, when he was first troubled with more or less pain in the right shoulder and side of the head. Cough and hoarseness were not noticed until July, 1877.

On examination, the superficial veins of the front of the chest are seen to be moderately distended, one markedly so, running from left axilla across chest to sterno-clavicular articulation. Breathing is almost entirely abdominal. Visible pulsations in both super-clavicular regions and in superficial arteries.

Pupils are equal.

Mensuration—During inspiration left side measures $18\frac{1}{4}$ ".

“ expiration “ “ “ 18.

“ inspiration right “ “ $18\frac{1}{2}$ ".

“ expiration “ “ “ $18\frac{1}{4}$ ".

Palpation—Appreciable impulse over first bone of sternum. Percussion gives no decided dullness along upper part of the chest, except a shade over the first bone of the sternum, more