

at the meeting of the Medical Society of London, on the 9th December, 1889, Dr. Theodore Williams in the chair.

Dr. Douglas Powell introduced the discussion and said that the object of the meeting was to elicit the experience of the Fellows in the diagnosis and treatment of aneurysm. It was specially urged that the true clinical features of aneurysm were alone—with very rare exceptions—yielded by the sacculated form of the disease, and that both in regard to prognosis and treatment the so-called fusiform aneurysm was totally different. The aneurysmal sac was necessarily an enlarging tumor, producing (1) pressure phenomena, and (2) cardio-vascular phenomena. In enlargement of the vessel without sacculation pressure phenomena were insignificant or absent, the cardio-vascular phenomena very marked. Pressure signs were of the first importance in the diagnosis of aneurysm, and to imperfect recognition of this fact and the attachment of too great a value to circulatory phenomena were attributable most errors in diagnosis, and illustrative cases were related. The value of the laryngoscope as an aid to diagnosis and of the sphygmograph as a recording instrument were emphasized.

Dr. Broadbent agreed that the pressure signs were more important for diagnostic purposes than the disturbances of the circulation, with this qualification that the pressure signs depended upon the situation of the aneurysm. In aneurysm of the ascending aorta, the tumor might attain a considerable size and yet produce very little pressure upon neighboring parts, owing to the natural mobility of the vessels. To hear a murmur was rather the exception than the rule. The "diastolic shock," either audible or perceptible to the hand, was one of the most valuable of signs. Fusiform aneurysm is not amenable to any treatment; the only thing was to lower the pressure, enjoining rest, but not with the idea of promoting anything like a cure. He had nothing to add to the Tuffnell treatment, but his own experience with the iodide of potash was that it very strikingly promoted consolidation within the sac. He had many times found that consolidation had followed the administration of the iodide, which virtually had the same effect as the Tuffnell treatment, running off the fluid