

stenosis, the figures for mitral stenosis and aortic regurgitation being between these extremes. Both Broadbent and Balfour place the average duration of aortic regurgitation after signs of failing compensation have set in at four years.

The acceptance of cases for life insurance in which there is judged to be organic disease requires a good deal of nicety in selection. There are obviously numerous cases which must be ruled out as likely to terminate fatally in a few years, or again from the nature of the disease a fairly definite opinion cannot be expressed that the applicant will live for a period of ten or more years.

Affections of the myocardium without valvular lesion occur for the most part over middle life, and therefore in a class who seek insurance less frequently than younger individuals. Cases of dilatation and hypertrophy are so frequently associated with degenerative changes in the arteries or kidneys, or result from alcoholic excesses that they are, in my opinion, too risky and uncertain to be eligible risks.

We must of course recognize that many individuals with moderate grades of cardiac enlargement survive for long periods of years, but it is difficult, usually impossible, to say with any degree of certainty how far degenerative changes have proceeded. Many cases of cardiac dilatation are associated with or due to sclerosis of the coronary vessels, and the impossibility of recognising such changes during life, in the majority of cases, should render us very cautious in recommending the acceptance of such risks, more particularly as the liability to sudden death is a notorious feature of such cases.

Fatty infiltration of the heart is usually found in very stout people who habitually get easily out of breath on exertion. Such individuals, altogether apart from the condition of the heart, are usually regarded with disfavour by insurance officers. Experience shows that the expectancy of life in obesity is not so good as in individuals of about normal weight, and it is a common practice to reject applicants who are more than 40 per cent. over weight. A hard and fast rule in this respect is however unfair. Individuals who owe their over-weight to bone and muscle must be regarded with more favour than when the excess occurs in fat and flabby subjects.

It is in valvular lesions that the chief problems lie in connection with life insurance. Serious lesions at the aortic valve are usually due to regurgitation. This in turn depends on rheumatic inflammation or on the slowly advancing sclerotic changes resulting from strain, syphilis, or arterial sclerosis. The rheumatic type is usually regarded as the more benign, owing to the freedom of the coronary arteries, but this advantage may be balanced by the tendency to further damage to the valves in subsequent rheumatic attacks. The liability to sudden death