cardiac power. The sudden blockage of a coronary artery is therefore a particularly serious occurrence, if the vessel is arteriosclerotic, and observations of the blood pressure in these cases are practically important as affording an insight into the force of the heart's action. In angina pectoris associated with a low blood pressure the use of rapidly acting heart stimulants is likely to restrict the dimensions of a resulting infarct, but if there is increased vascular tension any further elevation of pressure must be avoided and morphine and the vasodilators are indicated.—

Medical Record.

Good for One Condition but Bad for Another.

We have been somewhat interested by a series of letters which have appeared recently in the British Medical Journal in regard to the use of calcium salts as cardiac tonics in pneumonia and heart disease. The subject was first brought forward, at least in the present discussion, by a letter written by Sir Lauder Brunton, in which he advised not only the free use of oxygen and strychnine in many cases of pneumonia, but also the use of calcium chloride, chiefly with the object of obtaining the wellknown stimulant effect of this salt upon the cardiac muscle. Sir Lauder Brunton was promptly attacked by Sir James Barr, of Liverpool, who claimed that his suggestion concerning this plan of treatment was by no means original, and that he (Barr) had employed this method a long time before Sir Lauder had published his suggestions concerning it. Sir Lauder Brunton returns to the fray with the statement that he made his contribution solely because he had found these methods of value; that he thought that a certain number of lives could be saved by their ase, and as far as priority was concerned, he was most happy to recognize the early use of these substances by Sir James, provided it could be proved that he had employed them at an earlier period. He emphasizes the fact fact, however, that he recommended calcium chloride as a cardiac tonic, and not because the arine contains a small quantity of chlorides in pneumonia.

Into the debate Dr. Ewart, who is well known to many American physicians, next entered, and sends a letter in which he points out that while it may be correct to consider that calcium chloride exercises a stimulant effect upon the heart muscle, it must not be forgotten, on the other hand, that many practitioners are now employing this salt for the purpose of increasing the coagulability of the blood, and that if it is freely used, as advocated by Sir Lauder Brunton and Sir James Barr, that most dreaded complication of croupous pneumonia (heart clot) may