esueva 33,2 e 3,3. Solmente 20,7 pro cento
habeva habitate America durante plus que
10 annos ante le tempore del examine de lor
pressión sanguínea, sed illes mostravala un fre-
quência de hypertension de 8,5 pro cento, i.e.
le mesme frequentia etiam constatate inter
masculos blanc de nascentia american.

Inter individuos de nascentia estranier qui
habeva passate minus que 10 annos ins iste pais,
le frequentia de hypertension esueva minus que
un medictate del frequentia de hypertension
inter illes qui habeva passate plus que 10 annos
in America.

On ha le impression que si un subjecto vive
satis longe in le Statos Unite, ille ha—sin
reguardo a loco de nascentia o a racia—le
mesme prospectos de disveloppar hypertension
como si ille ha-sim nascite in le Statos Unite.

Masculos nascite in America, de non importa
qual aggruppamento racial, ha un plus alte
frequentia de hypertension que masculos del
mesme raccia nascite al estraniero.

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To study the phenomena of disease without books is to sail an uncharted sea, while to study
books without patients is not to go to sea at all.—William Osler. Aequanimitas and Other Ad-
globular thrombo valvular es indicate post le constatatation de un defecto plenatori intra le atrio sinistre, non attachate al pariete sinistro-atrial e de parve dimensiones in comparation con un myxoma.

4. Le diagnosto de thrombose sinistro-auricular es indicate post le constatatation de margination irregular del junction del auriculo sinistre con le atrio sinistre e reducete o absente visualisation del auriculo sinistre.

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Thyroid is administered in large quantities, in most cases unnecessarily, to patients all over the world. In most cases no great harm results from such medication. Because atrial fibrillation is seldom noted after prolonged administration of large doses of thyroid, the authors report a case in which a patient with normal size heart was noted to have atrial fibrillation and a grade 2 systolic murmur at the apex, together with pitting edema of both legs after taking 3 grains of thyroid daily for 6 years. With omission of thyroid substance, edema diminished progressively and disappeared within 2 weeks. The systolic murmur disappeared in a month's time and previously noted atrial fibrillation was replaced by normal sinus rhythm. Only 3 cases of atrial fibrillation and one case of atrial flutter have been reported arising after thyroid administration to the euthyroid subject; each reverted to regular sinus rhythm following cessation of the use of thyroid.

Kitchell
significant murmurs in 41 patients treated with relatively small doses of hormones was compared with that in 47 patients treated with relatively large doses of hormones. Results were related to the duration of illness prior to beginning of therapy.

In both the small-dose and the large-dose groups, the shorter the duration of illness prior to start of therapy the greater the frequency of disappearance of all significant murmurs. It was also noted that the frequency of disappearance of significant murmurs in the large-dose group was consistently greater than that in the small-dose group.

Data presented here suggest that results of hormone therapy in rheumatic carditis are related to the time allowed to elapse before treatment is started, to the dosage of the hormones, and to the duration of therapy.

**Summario in Interlingua**

In un serie de 100 patientes de febre rheumatic—omnes de etates de infra 17 annos e omnes tractate con ACTH o cortisona in varie doses e durante varie periodos—88 habeva lor attacco initial de febre rheumatic e mostrava definite signos de carditis.

Le frequentia del disparition complete de significative murmures in patientes tractate con relativemente basse doses del hormones (41 casos) esseva studiate in comparation con le frequentia del disparition complete de tal murmures in patientes tractate con relativemente alte doses del hormones (47 casos). Le resultatos esseva relationate al duration del morbo ante le institution del therapia.

In ambe gruppus—illo a basso e illo a alte doses—il esseva constatate que quanto plus breve esseva le duration del morbo ante le institution del therapia, tanto plus alte esseva le frequentia del disparition de omne murmures significative. Esseva etiam notate que le frequentia del disparition de murmures significative esseva regularmente plus alte in le grupo a grande doses que in le grupo a parve doses.

Le datos hic presentate pare indicar que le resultatos del hormonotherapia in carditis rheumatic depende (1) del tempore passate ante le initiation del tractamento, (2) del dosage de hormones administrate, e (3) del duration del curso therapeutic.

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3. The treatment of acute rheumatic fever in children.


Withering's introduction of the use of the foxglove for treating patients with congestive heart failure must be regarded as one of the great milestones of scientific medicine. Decoctions and infusions of the leaves and of the roots of various flowering plants had been in vogue since pre-historic times, and folk remedies were as numerous as the communities into which human beings had divided themselves. Mandrake leaves were used in ancient China to relieve pain. Tea came into vogue as a stimulating beverage at the beginning of the seventeenth century. As a specific remedial agent there is only one other with which digitalis can be compared—the alkaloid derived from cinchona bark which had a checkered career for three hundred years before digitalis was discovered, but unfortunately cinchona during that long interval had no dispassionate Withering to espouse its cause.—John F. Fulton. The Place of William Withering in Scientific Medicine. J. Hist. Med. & Allied Sc., 8: 10, 1953.
(ectomorphe), e 3 esseva de un lineage curte e grasse (mesomorphe). Le porcos grasse—in comparison con le porcos magre—habeva plus alte total concentrationes seral de proteina, albumina, e cholesterol e plus basse densitates lipoproteinic (−S > 400, 40–400, e 20–40). Iste differentias persisteva durante le periodo de rapide crescentia con dietas identic e simile valores relative del augmento de peso. Es sublineate le importantia del typo physic (i.e. del somatypo) in determinationes del valores seral de lipoproteinas e proteinas in animales del mesmo specie sed de varie linhas genetic.

ACKNOWLEDGMENT

We wish to thank Dr. Stanton M. Hardy, Lederle Laboratories Division, American Cyanamid Company, for the aureomycin used and Dr. George E. Farrar, Jr., Wyeth Laboratories, for the SMA formula fed the pigs.

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The physician without physiology and chemistry flounders along in an aimless fashion, never able to gain any accurate conception of disease, practising a sort of popgun pharmacy, hitting now the malady and again the patient, he himself not knowing which.—William Osler. Teaching and Thinking. Montreal M. J., 1895.


Medical Eponyms

By Robert W. Buck, M.D.

Adams-Stokes Disease. Robert Adams (1791–1875), one of the surgeons to Jervis Street Infirmary, Dublin, described “Cases of Diseases of the Heart, Accompanied with Pathological Observations” in the Dublin Hospital Reports 4: 353–453, Dublin, 1827. On page 391 appears the following:

“February 20, 1822, I was called to visit a gentleman in my neighborhood, aged fifty years, who had suddenly fallen down, as reported to me, in an apoplectic fit. I found him in a state of complete insensibility; his face (naturally pale and sickly) was now red and bloated; his breathing stertorous, with a slow pulse. . . . In the last year he had two apoplectic attacks, exactly resembling that which I had just witnessed: from these he recovered without any paralysis of the muscles. . . .

“An officer in the revenue, aged sixty-eight years, of a full habit of body, had for a long time been incapable of any exertion, as he was subject to oppression of his breathing and continued cough. In May 1819 . . . I saw this gentleman: he was just then recovering from the effects of an apoplectic attack, which had suddenly seized him three days before. . . . What most attracted my attention was, the irregularity of his breathing, and remarkable slowness of the pulse, which generally ranged at the rate of 30 in a minute. . . . [During seven years he had been seen] in not less than twenty apoplectic attacks . . . He would then fall down in a state of complete insensibility . . . his pulse wold become even slower than usual. . . . He recovered from these attacks without any paralysis. . . . In both these cases . . . apoplexy must be considered less a disease in itself than symptomatic of one, the organic seat of which was in the heart.”

William Stokes (1804–1878) in his article “Observations on Some Cases of Permanently Slow Pulse” which appeared in the Dublin Quarterly Journal of Medical Science 2: 73–85 (August 1), 1846, refers to these case histories as follows:

“In the fourth volume of the Dublin Hospital Reports, Mr. Adams has recorded a case of permanently slow pulse, in which the patient suffered from repeated cerebral attacks of an apoplectic nature, though not followed by paralysis. The attention of subsequent writers on diseases of the heart, has not been sufficiently directed to this case, which is an example of a very curious and, as there is reason to believe, special combination of symptoms.”

The authors have previously reported a series of 300 American soldiers killed in Korea, in 77.3 per cent of whom, some gross evidence of coronary disease was demonstrated. The present paper discusses all available clinical data and reviews the histopathology of the lesions. Complete records were available on 200 men. The average age was noted to be 22.1 years, average height 5 ft. 7¾ in. and average weight 145.8 lb. The gross and microscopic studies indicate that the coronary lesions are due in part to intravascular stress caused by the hemodynamics of the coronary circulation, as modified by anatomic factors. The stress results in subendothelial fibroblastic proliferation, deposition of a mucoid ground substance, and fragmentation of the internal elastic membrane. It is of interest to compare the lesions found in the American soldiers with the lesions found in a small series of Japanese natives now being studied. Thirty Japanese men, approximating the age group of the American soldiers, were found in material from 114 cases studied in Japan. The amount and distribution of the lipids on the elastica and within the parenchyma of the plaques found in the Americans, as compared to the Japanese, indicate that certain plasma lipids, as modified by diet, are another important agent in the development of coronary disease in young males.

Kitchell
de 104 subjectos. Le accordo median del duo
systemas esseva satisfactori, sed in 50 pro cento
del casos le differentias individual esseva quan-
titativamente significative. Le plus serie defecto
del systema a electrodos extremitatal esseva le
dfacto que illo non provideva un accurate com-
ponente dipolic fronto-dorsal in un tertio del
casos.

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Mann, G. V., Teel, K., Hayes, O., McNally, A., and Bruno, D.: Exercise in the Disposition of
Dietary Calories. Regulation of Serum Lipoprotein and Cholesterol Levels in Human Subjects.

Four men, aged 24 years, were studied during a control period and during a 4-week period in
which the caloric intake was doubled but the fat intake was kept constant at the control level.
During this time the subjects were required to maintain their body weights within 5 pounds of the
mean control weight by strenuous exercise. They were also studied during a third period of similar
high caloric intake but without high energy expenditure, and finally, they were studied during a
period of restricted caloric intake to remove the fat deposited during the third period. One of the
4 subjects left the experiment because of inability to maintain a constant weight during the period
of high intake and high energy expenditure. The observations indicated that the subjects were
able to double their caloric supply without increasing the level of their serum lipids so long as the
excess energy was dissipated as exercise. When the excess energy was no longer dissipated as exer-
cise, it was diverted to adipose tissue in 2 of the 3 subjects with an increase of serum cholesterol,
phospholipid, and lipoprotein levels.

The experiment is felt to simulate in miniature the nutritional progress of an American male
adult from early adulthood with high energy turnover associated with athletic endeavors, through
a long period of diminishing activity but with unchanged dietary habits. The authors state that
this leads in a variable time to an obese person at middle age, with poor muscular development
and with elevated serum cholesterol and β-lipoprotein levels although without visible lipemia.
The authors propose that the positive caloric balance over a long period elevates the serum lipid levels
and contributes to atherogenesis.

Rosenbaum

Thirty-one patients were re-evaluated an average of 21 months following mitral commissurotomy for mitral stenosis. The usual methods of evaluation were used and, in addition, a standard exercise test that required the patient to walk for 10 minutes at 1.73 mph on a 10 per cent grade. A physical fitness index of over-all cardiorespiratory performance was determined from observations made during this test.

In reply to a questionnaire, 29 of 31 patients classified themselves as better and 7 reported relapses due to heart failure or manifestations of the postcommissurotomy syndrome. Twenty of the patients, have some persistent limitation, 15 required daytime periods of rest, and all but 4 still required some form of medication. The most common limiting symptom was exertional dyspnea for 19 patients and ease of fatigue for 15 patients. Prior to operation 17 of the 31 patients could do full-time work, but all but 3 of them had some limitation with exertion; following operation 24 patients could work full time, and 15 instead of 3 had no limitations with effort. Prior to the operation 11 patients were totally disabled; this was the case in only 3 following surgery. Following surgery the murmur of mitral stenosis never disappeared although it was often less intense. The frequency of mitral insufficiency as determined by auscultation increased from 13 to 15 patients after surgery whereas atrial fibrillation decreased from 16 to 11 patients.

Exercise tolerance tests were possible in 29 patients. Following operation 26 were able to walk 10 minutes in contrast to 21 preoperatively, normal respiratory efficiency was achieved by 10 in contrast with 7 prior to surgery, and a normal physical fitness index score was made by 15 patients as compared with 9 previously.

There was correlation of subjective improvement with objective evidence in only 55 per cent of the patients. The authors express the belief that for some patients the term "better" describes a change in attitude toward their disease and disability, rather than improvement in cardiorespiratory function. This change in attitude may result from many factors including the positive, enthusiastic approach of the surgeon and careful medical supervision. The increase in the mean physical fitness index in the group of patients reported here was hardly greater than that in a similar group of patients studied in the same laboratory and treated only by medical therapy. The problem of differentiating patients with myocardial insufficiency from those with mechanical block at the mitral valve makes evaluation of response to treatment difficult.

Rosenbaum
occurreva solmente un vice e pneumonitis fibrinose 8 vices.

REFERENCES


The first case, an apparently normal 28-year-old woman without previous complaints, developed numerous episodes of syncope during the third month of a second pregnancy. The electrocardiogram showed a wide QRS with a separate slow initial component as in the Wolf-Parkinson-White syndrome, but the P-R was never less than 0.12 sec. The episodes could not be influenced by atropine orephedrine, but ceased as soon as complete A-V block with a typical left bundle-branch block pattern appeared. Death occurred suddenly during the eighth month of pregnancy. In a second similar case, the syncope appeared during the fifth month of pregnancy, followed by normal delivery. It reappeared during the following year, especially in the premenstrual period, but disappeared as soon as complete A-V block set in. The ventricular complex at this time as well as previously, showed deeply inverted, pointed T waves in leads I, and V1 to V3. Death occurred suddenly. The relation of A-V block to pregnancy and menstruation in these cases is attributed to hormonal influences.

Lepeschkin
Finally, I would like to review what has happened to a hundred of our patients, studied since 1949, who have been treated with one of the adrenal hormones during periods of activity of the disease. Figure 5 shows a survivorship curve that was constructed by Dr. Merrill of the Department of Biostatistics. The duration of disease in these patients was considered from the time the diagnosis was made, not the time of the first manifestation of illness.

In the first 3 months after diagnosis, 13 per cent of the patients died, but after that there has been a rather steady curve, which indicates that about 10 per cent of the original group have died each succeeding year. That leaves 52 per cent of these patients surviving a full 4 years after the diagnosis was made.

Dr. Ragan and his co-workers published an analysis of prognosis several years ago in which 38 per cent survived for 4 years from the time of onset of the first symptom until death. This 4-year survival of 38 per cent is considerably less than in our series; and ours is weighted in the opposite direction, since duration of life was calculated from date of diagnosis. Figure 6 shows the intervals of time from time of onset to time of diagnosis of the disease, illustrating again the chronic nature of this disease. Many of these patients had manifestations for 5, 10, or 15 years before the diagnosis was finally established.

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A group of 239 patients with toxemia of pregnancy occurring during the first gestation has been followed from periods of 5 to 10 years. All but 11 had subsequent pregnancies. Although a higher percentage suffered recurrent toxemia, only 27 (or 11.3 per cent of the total) were found to have permanent hypertensive disease. The expected incidence of hypertension for young women of this age is 8.4 per cent according to Master and his group. The authors believe that in all likelihood this figure is higher than the true incidence of hypertensive disease in women of this age, because many of the observations of Master and his group were made at a time these women were applying for jobs and when slight elevation of blood pressure is common. The authors conclude that toxemia of pregnancy results in increased incidence of hypertensive disease, that the more severe the initial illness (excluding eclampsia) the more likely there is to be eventual permanent vascular damage. Repeated pregnancies and recurrent episodes of toxemia may have some relationship to the later occurrence in hypertensive disease, in that most women developing permanent elevation of blood pressure did so after 3 pregnancies and at least 2 bouts of toxemia.