

**CONTRIBUTIONS TO
CARDIAC
PATHOLOGY**

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Contributions to cardiac pathology by John Cockle

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JOHN COCKLE

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TO

CARDIAC PATHOLOGY.

BY

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PREFACE.

THE following papers, scattered through the journals, are here collected, with a few notes and alterations.

Some questions they more or less incidentally discussed, would seem yet to await a final answer. For example, whether all the elements are found for a thoroughly satisfactory explanation of the first sound of the heart; the precise period of cardiac revolution, during which injection of the coronary arteries takes place; whether *data* are furnished for possible diagnosis in transposition of the great vessels of the heart; whether presystolic murmur may not, at times, be of indirect or regurgitant origin; and lastly, the immediate cause of death in insufficiency of the aortic valves.

The signs revealed by auscultation, in some cases, still admit of more correct interpretation.

As Professor Germain Sée has well remarked in a recent work*—'Well then! Do not deceive your-

* *Du Diagnostic et du Traitement des Maladies du Cœur.* Paris, 1879, p. 1.

selves. The subject is far from being exhausted. It were a strange delusion, did you expect to find at the bed-side the living reproduction of the picture, apparently so clear and simple, which is traced in books. Clinical observation will daily show you both the number and extent of the lacunæ that remain to be filled in the history of diseases of the heart; and it is while bringing new and important matter to this vast pathological edifice, that you will, at the same time, be made sensible of its fragility.'

4, Suffolk Place, Pall Mall,
February 3rd, 1880.

ON THE SECOND SOUND AND MURMUR OF
THE HEART AND GREAT VESSELS, IN
THEIR RELATION TO DIAGNOSIS.*

THE following contribution has for its object an inquiry into the second sound and murmur of the heart and great vessels, in their relation to diagnosis. It is solely one of practical character; in some points, not altogether in accordance with the current teaching; and is, consequently, open to the fullest discussion and criticism. The facts are stated as they occurred to me, together with such inferences as may be considered fairly warranted from the subject matter.

I shall premise a few observations generally respecting the impulse, rhythm, and sounds of the heart, before entering into the question of the special modifications in disease connected with the second sound, etc. The ordinary expression of the heart striking against the chest-wall appears inaccurate, since it is now pretty generally admitted that the heart, in the perfectly normal state, never disconnects itself from the parietes. The conditions necessary for an actual stroke are, therefore, absent. In the language of Charles Robin, 'On ne peut frapper ce qu'on touche, et l'on ne bat que ce que l'on ne touche pas'. The apparent stroke

* *British Medical Journal*, 1857.