TUBERCULAR PERITONITIS AND CIRRHOSIS OF THE LIVER.

Heintze,* as the result of the observation of twenty-five fatal cases, in all of which autopsies were made, deduces some interesting facts. He divides the cases into three groups. 1. Those where there was copious fluid effusion. Here the clinical symptoms resembled those met with in ascites from congestion, but they were distinguished from this condition by the very large amount of albumen contained in the fluid drawn off on tapping. No tubercle bacilii, however, seem to have been found. After the distension had been relieved by the removal of the fluid, the thickened peritoneum could frequently be felt and peritoneal friction could be detected. These effusion cases formed the most numerous of the three groups. 2. The plastic form, producing a coating or tumor like bodies. The pseudo-tumors formed by the exuded plastic matter could generally be distinguished from real tumors by the ill-defined character of their edges. group comprised nine of the twenty-five cases, and in five of them there were tumors of considerable size. In plastic inflammations there is usually more pain than where there is much fluid effusion; there is a tendency to the formation of kinks in the gut and obstructing glands, so that fæcal accumulation and ileus are not uncommon. 3. The latent form, where there is neither any great amount of effusion nor much plastic exudation.

One remarkable point is mentioned, viz., the frequency with which tubercular disease of the peritoneum is associated with cirrhosis of the liver. This was found in seven of the twenty-five cases. Pleurisy was found twenty times, and signs of scurvy twice. In many cases there were long remissions, so that the prognosis is not necessarily so grave as it is usually supposed to be. The patients died mostly from general tuberculosis, very rarely from perforating peritonitis or from tubercular peritonitis. Most of the cases occurred in the male sex, frequently amongst men addicted to drink. In three instances an injury to the abdomen had preceded the commencement of the symptoms.

In connection with the coincidence of tubercular peritonitis

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^{*} Breslau Clinic, quoted in Lancet, April 6th, 1889, p. 695.