

margins were distinct, but the upper could not be felt, and the note over it was slightly resonant. The tumor could not be traced to the liver, the flat note of which ceased at the costal margin. The mass felt smooth, semi-elastic, and could be moved from side to side about one inch. It was very tender to manipulation. From behind its lower border, near the inner margin, a rounded secondary mass projected about an inch ; it was adherent to the main mass. The whole descended slightly with inspiration, and could not be held down during expiration. But the tenderness and the slight degree of abdominal respiration rendered it difficult to demonstrate respiratory movements in the tumor. The right kidney was not palpable. The urine was normal. An exploratory operation was

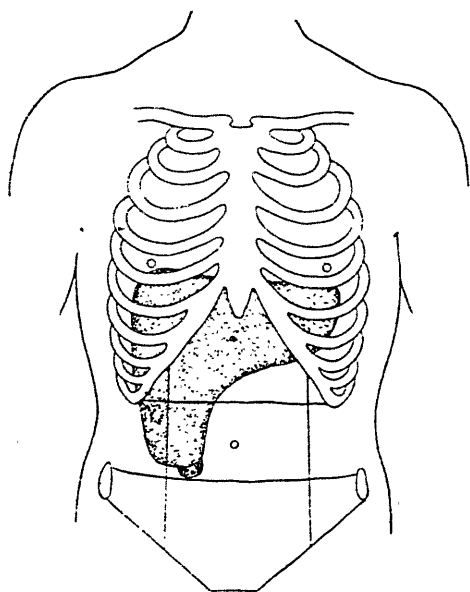


FIG. 1.

deemed advisable, and Dr. I. H. Cameron opened the abdomen, to find a broad, thin process of the liver extending down below the umbilicus, as shown in the diagram (Fig. 1). Behind this process, and adherent to it, lay the right kidney, forming the rounded mass projecting from the lower margin.

CASE 2. A woman, aged about 45, with symptoms much like the foregoing. As shown in the diagram (Fig. 2), the liver process was narrow and extended down close to the umbilicus. It was very freely movable from side to side. In this case also the lower part lay in close contact to the abdominal wall, while the upper part receded, and could not be traced