

and were both more disposed than I was to give weight to the evidence in favor of gall-stones as the "*fons et origo mali*," as the patient was fond of expressing it. At any rate he rapidly mended, and left London about the end of June for the north. About six weeks later I heard from him, to the effect that he was much better, that he had "turned the corner," and that he was about to start the following day for Sweden. His brother-in-law, however, wrote to me that "he thought him in a bad way when *not* under the influence of morphia."

The sequel of this case is told in the following report of his last fatal illness and the post-mortem examination by Dr. C. Forsenius, of Gothenburg:—

"Mr.—, sixty-two years old, arrived at Gothenburg, in Sweden, from the little bathing-place Särå, on the 29th of August, 1874, in a comparatively good state of health. The sea-air and the voyage excited an unusual appetite, for which reason he took a rather copious breakfast, and ate also afterwards a good dinner. The same day, at eleven o'clock in the evening, he was suddenly affected with pain in the stomach and sickness. In the night he made a subcutaneous injection of morphia ($8\frac{1}{2}$), and fell asleep. I was called at 4.30 a.m., and found him then in a soporose state, with very dilated pupils, with a scarcely perceptible pulse, of about 130 beats in the minute, with cold bluish hands and feet, with the belly very swelled, hard, and tympanitic. I then at once considered it to be a peritonitis from a perforating ulcer of the stomach, and ordered only to put a flannel moistened with oil of turpentine and a warm poultice on the belly. At my next visit, between ten and eleven o'clock in the forenoon, he was in agony, and died soon, very quietly. On the 31st of August, thirty hours after death, I made a post-mortem examination in company with Dr. Ewart, and we found then all signs of death, the body exceedingly meagre, the belly very swelled, the intestines covered with a viscid lymph, distended by gas, and in the upper part lively red; the ventricle, or stomach, very large and dilated, had a hole or perforation in the minor curvature, near the cardia, of round form and with rounded edges, of about the size of a sovereign, which had been covered by the un-

derside of the liver, to which it had been lightly adherent; its mucous membrane was grayish and sloughy, with dark spots and striæ of extravasated blood. The pylorus and the upper part of the duodenum were indurated and contracted, so that only the end of the little finger could be enforced in the passage, and the wall was there nearly half an inch thick. The liver was rather diminished in size, more dark and dense than usual. The gall-bladder was enlarged, as also the gall-duct (choledochus), but contained at present no gall-stone. The head of the pancreas was also somewhat enlarged and indurated as the surrounding duodenum. The heart was of diminished size and contracted, empty from blood; its mitral valve was white and a little thickened; the aortic valves were ossificated, and the aorta was dilated to the double of its natural size (aneurisma), with many small atheromatous patches on its inner side. The lungs were otherwise healthy, but had in the agony been œdematous. There was also in the serous sacs of peritoneum, pleura and pericardium, yellow, watery exudations. He had even very large hemorrhoidal piles yet bleeding after the death."

I am much indebted to Dr. Forsenius for this careful and excellent account of the post-mortem examination.

The issue of this case possessed very great interest for all those who had seen the patient professionally during life, and were acquainted with his medical history, and it seems to me that there are many points of general interest to be noticed in it.

In the first place, it shows that scirrhus disease of the stomach may run a very protracted course, extending over a long series of years, and that the patient may enjoy long intervals of apparently perfect health. This latter fact was strongly dwelt upon by one of the physicians whom he consulted as a counter-indication of the existence of malignant disease. Here seventeen years elapsed between the first onset of gastric troubles and the fatal illness. In the second place, we learn the striking efficacy of judicious treatment in relieving the symptoms attending this disease. The benefit derived from the Carlsbad course was remarkable, and lasted for some time. We can easily understand