

ated with pain, vomiting, constipation and then diarrhoea; the stools clay-colored, but neither the skin nor the urine were bile-stained. In September 1887 he gave up practice, and the abdominal symptoms have been somewhat better, though his general health has been impaired by an attack of epididymitis.

Examination showed a moderately well-nourished man; abdomen full, nowhere tender on pressure. Stomach tympany reached high in the chest, and "splashing" could be readily obtained by manipulation or by rapid contraction of the abdominal muscles. No tenderness in lower region. By making a forced inspiration or rolling quickly on to the left side the patient could cause a tumor to emerge in the right hypochondriac region, just beneath the edge of the liver, and which could be moved over to within an inch of the middle line. It was firm, rounded, and on its upper and anterior aspect a distinct depression could be felt. By pressure it could be made to slip back under the liver. There could be no question that this "abdominal tumor" which had caused so much mental and bodily distress for so long a time was the movable right kidney. In the erect posture a marked difference existed in the appearance of renal regions behind, particularly apparent in looking over the patient's shoulders. There was a distinctly deeper depression on the right side corresponding to the 11th and 12th ribs. Percussion gave flat tympany over the right renal region when the patient was on the left side or when the kidney was voluntarily dislocated by a deep inspiration. When it was pushed back, or when the patient lay on his back on the edge of the bed, there was dulness similar to that which existed on the left side. The urine was normal.

The symptoms have been chiefly gastric, and there is now moderate dilatation of the stomach, a condition which has resulted most probably from the pressure of the dislocated kidney upon the duodenum. Several instances of the kind have been reported. Gastro-intestinal attacks may be the only effect of a floating kidney, and the occurrence of paroxysms of pain with vomiting may even lead to the suspicion of organic disease. The condition in women is very often associated with nervous