## TONGUE-LIKE ACCESSORY LOBES OF THE LIVER.\*

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THE chief interest in this subject is in connection with the diagnosis of abdominal tumors. Unless fully alive to the great variety, as to shape and position, in which these accessory lobes of the liver may present themselves, one will often be misled in the diagnosis of abdominal tumors. In not a few cases, even with the utmost care, a positive opinion as to the nature of these tumors cannot be given.

Riedel, who first drew attention to the importance of these abnormal lobes, believes them to be due usually to pressure on the liver, as in tight lacing, and to traction, by an enlarged gall bladder. They are met with usually in women. In nine of his twelve cases the gall bladder was attached to the lower part of the process.

So far as can be inferred from the seven or eight cases with which I have met, tight lacing has little to do with the production of the deformity, and the position of the gall bladder at the lower part of the mass is an accident rather than a cause of its formation. In many, if not most, cases the formation of these lobes seems to be developmental, having nothing to do with either pressure or traction.

Case 1. A woman, act. 42, was admitted, under my care, to the Toronto General Hospital, October, 1894. She was very anæmic and considerably emaciated. She complained of much pain in the abdomen, and frequently vomited after meals. There were also irregular pains in various parts of the body. She was very nervous, pulse quickened and temperature normal. The symptoms were those of well-marked neurasthenia, with nervous dyspepsia and constipation. The abdomen was rather full and tender in all parts, but especially so to the right below the costal margin, where a tumor-like mass could be felt. Over this the percussion note was dull; elsewhere the abdomen was tympanitic. This mass was about four inches broad, and extended from the costal margin to about one inch below the line of the umbilicus. Its lateral and inferior

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