Progress of Medical Science.

MEDICINE AND NEUROLOGY.

IN CHARGE OF

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ON MOTOR-INSUFFICIENCE OF THE STOMACH.

(*Berl. klin. Woch.*, No. 11, 1897. *International Medical Magazine.*) By Rosenheim.

The motor power of the stomach is often the most important point to determine, and this is by no means always dependent upon the capacity of the organ. Splashing under the umbilicus five hours after ingestion of fluid, visible peristaltic and antiperistaltic waves and vomiting of long retained food are aids in diagnosis, but the latter is only assured by the discovery that the stomach is not empty seven hours after a test dinner or three hours after a test breakfast, or even more positively after a night's fast. The motor weakness may occur suddenly in neurasthenic individuals and after errors in diet when it usually disappears soon with proper handling. But a sudden onset is apt to occur after injury, even when this does not directly affect the stomach, and is then due to a paralytic condition of the viscus which may become permanent and resist treatment strongly. The gastric crises of tabes may cause motor weakness by overstrain in vomiting, and the condition is frequently present in connection with the epigastric herniæ of which Witzel, Linden, Bohland, and others have written. The prognosis is usually, but not always dependent upon the grade of the insufficience. In patients of nervous dispositions, especially, one often finds mild grade which is very persistent, and a prognosis can never be except after watching the results of treatment for a time. Treatment should be (1) dietetic—a dry diet when the stomach cannot empty itself of moderate quantities of liquids, and when the patient cannot rest after meals. When these two conditions can be fulfilled fluid may be allowed in small quantities frequently taken. (2) Local—contrary to Boas he considers local treatment always indicated—in severe forms to remove food remnants and prevent fermentation, in less severe cases for its tonic effect, and one should always use the douche as recommended by the author, fluids of low temperature (22°–