

hydria, and in cancer an absence of free Hcl., usually some lactic acid, and the Boas-Oppler bacilli.

Personally, my greatest difficulty in diagnosing between ulcer and cancer has been in some cases where we have obstruction to the outlet at the pylorus, with or without a palpable tumor, causing great dilation and stasis and cumulative vomiting. Here, the presence of free Hcl., perhaps in excess, and the intermittent finding of blood, points strongly to simple ulcer, as opposed to the absence of Hcl. and the constant presence of blood, as is usual in carcinoma. Some weight may be attached to the more cachectic appearance of the subject of cancer, showing debility and emaciation.

In a few such cases I have felt it wise to reserve my definite opinion until after the surgeon's exploratory examination, and even then not have my doubts removed. I have just recently had a case with the above symptoms. The abdomen was opened, and even then the surgeon was at a loss to say positively, but as there were two distinct tumors and one involved the duodenum along with the pylorus (a condition rarely met with in cancer), I would believe the condition due to simple ulceration and its consequences.

Lastly, we meet with cases which come under neither one nor other of the two clinical groups I have described. They present no aggressive symptoms or signs. The history merely suggests a dyspepsia; a weight at the epigastrium, gaseous eructations, or some regurgitation, along with symptoms which may be set down as being due to neurasthenia. A hyperacidity of stomach contents and occult blood in vomiting and stools will clear up our diagnosis. These cases are to be differentiated from gastralgia nervosa and hyperchlorhydria.

In gastralgia nervosa we have a spasmodic pain in the stomach independent of time of taking food; pressure relieves the pain. There are no tender points; vomiting, if present, occurs at no regular times, and there is an absence of blood in stomach contents or stools.

In hyperchlorhydria, heartburn and eructations are complained of, pain comes on two to three hours after eating, and is relieved by eating or by alkalis. There are no circumscribed tender areas as in ulcer, nor is blood, occult or otherwise, found in the stomach contents or feces.