

CANADA

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DUODENAL ULCER.

CLINICAL AND ANATOMICAL CONSIDERATIONS BASED ON NINE CASES.

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(Read before the Philadelphia County Medical Society.)

The solitary ulcer occurs more frequently in the duodenum than in any other portion of the intestine, and in its ætiology and morbid anatomy is almost identical with the gastric ulcer. It is rarely met with below the bile papilla, at which point the acid chyme is neutralized. Blood stasis in a circumscribed area of the mucous membrane is the condition which permits of erosion by the gastric juice. Although the cases are few in number in which actual disease of a vessel has been discovered, they confirm in a striking manner this view. Thus Merkel* found an embolus in a duodenal vessel at the base of an ulcer, and there were emboli in other organs; similar cases have been reported of plugging of the arteries at the base of ulcers of the stomach. Thrombosis is also a cause, leading first to hemorrhagic infiltration and inducing a condition which permits of erosion. The experimental production of gastric ulcer by Cohnheim and others lend additional support to the embolic view. The following case suggests that in the duodenum there is possibly another mode in which ulcers may arise :—

* Wiener Med. Presse, 1866.