days before admission. His appetite has been good, and the bowels regular. Examination showed marked emaciation and fairly general edema. There was slight dulness over the right base. The abdomen was distended, tympanitic in the elevated and dull in the dependent portions, but it was held so tensely that attempts at palpation were not satisfactory. The urine was of dark color. Specific gravity 1012, showed a faint trace of albumin and contained hyaline and granular casts. The temperature was slightly elevated. The edema increased and the patient died on July 4.

Autopsy showed a large scirrhous cancer involving nearly the whole of the stomach, and extending to the esophagus. The stomach was adherent to all surrounding structures. The growth extended through to the peritoneum at places. There were secondary growths in the glands and liver.

CASE III.—Tuberculosis and pneumothorax, all the symptoms those of chronic consumption; no stomach symptoms.

No. 71.—J. A., Hospital No. 10,050, male, aged 41 years, admitted June 7, 1894, complaining of pain in the chest and cough. His family history was tuberculous. He had been very healthy previously. His present illness dated back about six months, though for some time before he had been troubled with a cough. This became worse, he had sharp pain in the left chest and several attacks of hemoptysis. For five months he had diarrhea, with the passage of mucus and blood in the stools. He has not had any appetite. There has been much loss of flesh. There was no history of any stomach-symptoms.

Examination showed great emaciation. There was clubbing of the fingers. There were marked signs on both sides of the thorax, both on percussion and auscultation. Pneumothorax was present on the left side. The abdomen looked natural, was nowhere tender and was negative on palpation. The temperature was only slightly elevated. The patient

rapidly sank and died on June 11.

Autopsy showed cancer of the lesser curvature of the stomach with secondary growths in the lymph-glands and liver. The mass measured 6 by 5 cm. It was soft and fungoid in character. The pylorus was free. There was tuberculosis in both lungs and pneumothorax on the left side. Tuberculous ulceration of the large and small intestine was also found.

CASE IV.—Multiple thrombi of superficial cutaneous veins; profound and progressive anemia; no gastric symptoms.

No 64. G. N., Hospital No. 9131, male, aged 50, admitted January 31, 1894, complaining of weakness and pains in the arms and legs. His family and previous history were normal. The present illness, which began four weeks before, he attributed to exposure, wet and cold. He had a chill fol-