

ptosis, or ptosis may be the result of the associated malnutrition. The ligaments of the liver and the vena cava afford a considerable degree of support to the organ, and Faure has shown experimentally that the organ is more readily dragged down after division of the ligaments.

Lack of support by the intestines and abdominal walls is of more importance in maintaining the organ in situ than is suspension by the ligaments. The most important immediate cause of ptosis is relaxation of the abdominal wall, resulting from pregnancy or other forms of abdominal distension. Malnutrition operates by relaxing the abdominal walls, in the removal of supporting abdominal pads of fat and in allowing of stretching of the abdominal ligaments.

Hepatoptosis is invariably associated with ptosis of other organs, resulting from similar causes.

The symptoms vary with the degree of the affection, and in many cases are entirely absent. Digestive disturbances are frequent, constipation and tympanites being usually present. Pain is often severe, but is more liable to be indefinite. Gueniot has observed a dragging pain behind the upper end of the sternum, due to the tension on the diaphragm, and through it on the mediastinal structures. Ascites and jaundice are infrequent. The diagnosis rests on physical signs. In some cases a mobile tumour is felt, corresponding in shape and dimensions with the liver; it is dull on percussion and the normal site of the liver is resonant. By manipulation the organ may sometimes be replaced. In slighter degrees the organ may be felt during inspiration by grasping the abdomen below the costal border between the thumb in front and the fingers of the same hand behind.

Treatment must be directed toward improving nutrition and increasing the strength of the muscles by suitable exercises and massage. A suitable belt or corset prevents further displacement by affording support to the organ. In severe cases surgical intervention may become necessary.

A. ERNEST JONES. "The Onset of Hemiplegia in Vascular Lesions. *Brain*, 1905.

This article is based on the fatal cases occurring at University College Hospital for a period of sixty-five years.

Vascular lesions only have been recorded. In all there were 160 lesions occurring in 139 patients; 123 were cases of hæmorrhage, 24 of thrombosis and 13 of embolism.

It is now recognised that it is exceptional for any of these lesions to occur during great exertion, a feature which Gintrae series of 840 cases, made 50 to 100 years ago, amply establishes.