

the eighth or tenth day they were attacked by a slight cough, which gradually increased. Both became emaciated; one died on the fifteenth day, the other was killed (being very ill) on the twenty-fifth day. During the illness both animals had an eruption on the teats and skin of the udder, which appeared in successive crops. From one of the cows on the fifth day milk was drawn from a healthy teat, the milker's hand having first been thoroughly disinfected. From this milk cultivations were made, and it was found that thirty-two colonies of the diphtheria bacillus, without any contamination, were obtained from a single cubic centimetre. The bacillus was also found in the eruption on the udder, and fluid from the eruption was capable of producing a disease in calves characterised by a similar eruption, together with severe broncho-pneumonia and fatty degeneration of the kidney. These two lesions—broncho-pneumonia and fatty degeneration of the kidney—are those observed both in the spontaneous diphtheria of the cat, and in the disease produced in that animal by inoculation; the symptoms in the cat are, in fact, mainly those of lung disease.

An accident carried the experiment a step further. The two cows above mentioned were kept at the Brown Institute, and on the fifth day after inoculation, when the diphtheria bacillus was found in the milk drawn from one of the cows, orders were given that the milk should be thrown away. The attendant, however, chose to consider that the milk would be good enough to feed cats, and accordingly gave some of it to two of these animals which had been at the Brown Institution for several weeks, and were in good health. Within a day or two these two cats sickened, and, after suffering for several days from symptoms like those of spontaneous cat diphtheria, died. This was at the end of March. Between the beginning of April and the beginning of May fourteen cats became similarly affected, some more severely than others, and some died with the characteristic morbid changes.—*British Medical Journal*.

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SUCCESSFUL GASTROTOMY.—Dr. Terrillon records (*Le Progress Medical*) a very

successful case of this operation. The patient, a strong man aged 53, had suffered several years from violent attacks of gastralgia with obstinate dyspepsia. After a time deglutition became painful and difficult, and often followed by regurgitation. For a time he lived solely on a liquid diet. An œsophageal bougie was passed at intervals, but gradually the stricture became so impermeable that the smallest bougies with bulbed extremities failed to pass the obstruction. An operation was decided upon, and an incision of from 5 to 6 centimetres (2½ to 3 inches) was made. The stomach was stitched to the abdominal walls, and after ascertaining that the two surfaces were carefully adapted, a small opening was made into the stomach. A red rubber sound was then introduced and some yellowish gastric juice escaped; the sound was fixed to the abdominal wall by a silver wire. The patient suffered very little inconvenience from the operation except a good deal of thirst. Three hours after the operation milk and broth were injected into the stomach, and were readily digested. During eight months feeding through the artificial opening was resorted to successfully, the patient gaining strength and weight, although suffering considerable pain and inconvenience from the escape of the gastric juice and contents of the stomach, leading to an ulcerated condition of the skin surrounding the opening. Dilation of the stricture was then attempted through the orifice, but it was only after repeated efforts that a small, rather stiff, whalebone rod passed through the stricture. The rod was allowed to remain a few minutes and was replaced by another, for which it acted as a conductor. During the following days larger rods were passed, and the stricture was gradually dilated so that fluids in small quantities could be again introduced through the mouth. The œsophagus gradually became permeable to solid food, and the artificial opening was closed by operation successfully. The patient, who had regained perfect health, was able to resume his ordinary work, deglutition being easy and painless.—*Provincial Medical Journal*, June 2, 1890, p. 361.