

to be the condition in a normal abdomen. Let us now consider the condition of the stomach when the intra-abdominal tension is diminished. This tension is maintained by the tone of the abdominal muscles, and by the presence of viscera, fat, etc., within the abdominal cavity. It is quite evident, therefore, that it may be reduced by many circumstances, such as rapid emaciation, childbirth, removal of abdominal tumors, severe acute diseases. In such conditions the abdominal wall no longer supports the intestines, and as a result the latter descend and form a pendulous abdomen. The stomach, now held in position only by the poorly nourished and probably hereditary weak ligaments, gradually descends, and the pathological condition under discussion is produced.

As stated above, gastroptosis is a common disease. It occurs in both sexes, but the great majority of the patients whom I have examined have been women who have borne one or more children. The sequence of events which led to the displacement of the stomach is readily understood.

The symptoms of this disease depend more upon the associated condition—hyperacidity, atony, gastritis, etc.—than upon the gastroptosis itself. Thus the symptoms of gastroptosis with hyperacidity would be quite different from those of the same disease with gastritis. Flatulency, belching, heartburn, pain or uneasiness in the epigastrium are common symptoms. The bowels are usually constipated. The patient is usually more or less emaciated and is frequently weak and neurasthenic. In many cases the appetite is good, but patients do not eat on account of the distress which follows.

The functional signs are variable. There may be normal acidity, hyperacidity or subacidity. I have found hyperacidity to be present in the great majority of cases. The gastric contents are expressed with difficulty on account of the atony of the stomach. The subjective symptoms and functional signs are usually insufficient to make a diagnosis, but the objective symptoms are more distinctive. The epigastrium is depressed, and the lower part of the abdomen full and flabby. When the stomach contains a liquid the splashing sound may be produced by striking the abdominal wall over the region of the stomach. The splashing sound may be used to determine the positions of the curvatures of the stomach. Ptoses of other abdominal organs may be present. Of these movable right kidney is most frequently made out. On inflation of the stomach with air the lesser curvature may be seen running across the abdomen below the liver, and the greater curvature will be found below the umbilicus, and even as low as the symphysis pubis. The treatment is, as a rule, very satisfactory. Prophylaxis is very important, and it should be remembered that gastroptosis is a common disease, particularly in women, and one