

Patient was much emaciated, and the skin and conjunctivæ were slightly jaundiced. Examination of the circulatory and respiratory systems elicited nothing of importance. The liver was palpable about two inches above the level of the umbilicus in the mammary line. On inflation of the stomach, the great curvature was found as low as the umbilicus. Opposite the eighth and ninth left costal cartilages a lump could be indistinctly palpated, and at the level of the umbilicus and to the left, an elongated mass could be felt. Both these masses moved up and down with the respiratory movements. The recti muscles were slightly rigid above, and some tenderness on palpation was complained of. Examination of the stomach contents showed the absence of free acid; no Oppler-Boas bacilli were found. After entering the hospital the pain, on taking food, disappeared. Patient however, began to suffer from severe pain in the right lumbar region, radiating to the front of the abdomen in the iliac region, and passing down into the thigh, especially along the sciatic nerve. The epigastric tumors became more prominent and the patient's general condition worse. The left supraclavicular glands continued to enlarge slightly while he was under observation. He died on October 2nd, 1905.

A diagnosis of carcinoma of the stomach, with secondary involvement of the liver and thoracic duct, and through the latter, of the cervical lymph nodes, had been made.

Autopsy confirmed the diagnosis. About midway between the cardiac and pyloric orifices of the stomach, a large oval-shaped projecting mass was found, extending from the greater curvature up the anterior wall. A number of hard nodular masses, the size of a walnut, were found in the great omentum just below the stomach. The surrounding glands, including the retroperitoneal, those in the portal fissure and about the head of the pancreas, were much enlarged. The receptaculum chyli was involved in a mass of cancerous tissue, and the thoracic duct showed irregular nodular enlargements along its course, encroaching upon, but in no place completely occluding, its lumen. Near the upper extremity of the duct a number of enlarged glands were noted. The posterior mediastinal glands were enlarged and numerous small yellowish-white nodules were found scattered throughout both lungs.

Microscopic examination of the tumor showed the structure of a columnar-celled cancer. The extreme pain in the right lumbar region, radiating forward to the abdomen and passing down into the thighs, was readily explained by the pressure