

cancer, but the absence of which would not exclude that diagnosis. The patients' general appearance which while it showed the effects of emaciation, did not give any evidence of anaemia so frequently observed in ulcer, nor of the cachectic appearance of cancer. While those subjective symptoms and physical signs point to gastritis rather than to cancer or ulcer, they are not pathognomonic. Taken in connection with the chemical examination of the stomach contents their evidence is verified and corroborated. The most important fact elicited by this means is the absence of free hydrochloric acid. As the duration of the disease practically excludes cancer so the absence of free hydrochloric acid renders the evidence against ulcer almost conclusive. By exclusion, therefore, we arrive at the diagnosis of gastritis, and as by examination we find the other organs of the body in a healthy condition, we conclude that the gastritis is in this case primary. What, then, was the cause? The patient has never been addicted to the use of alcoholic stimulants. He has not used tobacco extensively. He has not carious teeth. These not uncommon causes are, therefore, excluded. He has, however, been in the habit of taking his meals very rapidly and has lived on strong and coarse food. His food has been imperfectly masticated, passed down into the stomach in lumps and not thoroughly mixed with the saliva. Extra work was thus thrown upon the stomach, the food was retained in that viscus for too long a time, putrefaction and fermentation were set up. These processes in turn set up an irritation which led to a hyperaemic condition of the gastric mucosa, and thus undue secretion of mucus took place. This mucus further interfered with the act of digestion and thus further aggravated the trouble.

Treatment—Lavage, hydrochloric acid and a bitter; the bowels regulated. Result—in about one month marked improvement; patient able to take solid food without discomfort; bowels acting better; general tone of muscular system improving. Patient passed out of my observation in four weeks.

Case II.—C. N., æt. 43, unmarried. Came under my care Oct. 18th last. Family history good. Personal history: Almost totally blind and hearing very dull. General appearance indicates general depression. Muscles soft and flabby; anæmic; rather cachectic. Has never used alcohol, but for years has used