

place in the heart are the same ; but the general treatment is too extensive to be indulged in during the short time allotted me for these remarks.—*The Post-Graduate*.

### A FAMILY OF RUMINANTS.

Dr. L. R. Müller reports the cases of a father and two sons who were ruminants. In from fifteen to thirty minutes after a meal, the ingested food reappeared in equally large portions in the mouth. This was re-chewed and re-swallowed, and in from three to four minutes another portion came back in the mouth to go through a similar process. This continued anywhere from one-half an hour to an hour after a meal, and was accompanied by a renewal of pleasant taste and by a certain desire to continue chewing the regurgitated food. If the rumination was interrupted, an uncomfortable feeling in the stomach developed. The three men were in perfect health, had no complaints of any kind, and there was abundant evidence that the intestinal digestion was perfect. The father died of carcinoma of the stomach. The autopsy disclosed an hour-glass contraction ; the cardia and the œsophagus were so dilated that they admitted three fingers easily. Müller describes as the possible causes of this anomaly digestive peculiarities and atavism. The act, however, was in all three patients an involuntary, automatic one.—*New York Medical Journal*.

### GASTRIC ULCER AND CANCER.

In regard to the origin of carcinoma of the stomach from the familiar chronic "round ulcer," it is asserted (a) that gastric carcinoma of such origin arises from the parts of the edge most exposed to mechanical irritation by the contents of the stomach, and, accordingly, that in the pyloric region such growth usually springs from the lower margin. This origin of pyloric cancer is said, moreover, to be very frequent, while less so, proportionately, in other parts of the stomach. Accordingly, early gastro-enterostomy is strongly recommended in cases where there is reason to believe that the puckering of an ulcer has commenced to narrow the pyloric orifice ; and when the operation is not allowed by the patient, or is not thought advisable, the latter should chiefly use liquid, semi-liquid and fatty foods. A special caution is given in respect of the ingestion of pieces of crust, of crisply toasted or fried portions of bread ; also in the ingestion of carbohydrates. This is especially important in case of elderly people with few teeth and insufficient saliva.—*The Medical Press*.