

is also prone to become morose, irritable, and melancholic, and not infrequently exhibits a strong tendency to hypochondriasis. One of the peculiarities of the anæmia and its attendant debility is that while they remain unaffected by the administration of iron or arsenic, they rapidly respond to rest in bed and careful dieting. A peculiar and distressing symptom which it exhibited by many women who suffer from vertical dislocation of the stomach is a loud gurgling noise that accompanies the respiratory movements whenever the organ is filled with food. In such cases the act of inspiration is attended by a splashing sound in the abdomen, while during expiration a series of gurglings become audible, which may be heard at a distance of several yards. These noises become intensified if the patient yawns, coughs, or sneezes, but can be suppressed by loosening the corset, lying on the back, or by pressure applied to the abdomen with the object of pushing the stomach towards the diaphragm. Strumpell believed that the sounds were indicative of dilated stomach, but Glozier has shown that this condition is not necessary to their production. It would appear that the phenomenon is due to the partial constriction of the stomach aforementioned, which gives rise to the formation of two pouches superimposed one upon the other. The movements of the diaphragm and the abdominal wall during respiration cause the fluid present in the organ to regurgitate in a rhythmical manner from one sac into the other, and the splash is produced at each collision between the liquid and gaseous contents of the viscus. Occasionally the duodenum is dragged down to such an extent by the enlarged and dislocated stomach, that the opening of the bile duct becomes situated in an angle between the two limbs of the intestine. In such cases bile is apt to trickle constantly into the stomach, and to be vomited at intervals (Malbranc, Riegel), as much as three pints being sometimes ejected during the course of the day (Weill.) An excess of bile in the stomach is known to inhibit the action of pepsin (Bernard, Lubet), and it has therefore been surmised that the emaciation which always accompanies this abnormal symptom is the direct result of disordered digestion. It is more probable, however, that the loss of bile to the system is the principal cause of the loss of flesh, since the establishment of a biliary fistula in animals is always followed by excessive emaciation. In addition to the characteristic bilious vomiting, the patient almost invariably suffers from flatulence, loss of appetite, distension after meals, and a constant feeling of nausea.

*Physical signs.*—The abnormal appearance of the chest will usually suggest the possibility of dislocation of the stomach. In