

to reveal any ruptured vessel or cause for the hæmorrhage, which would seem, therefore, to have been of capillary origin.

The jejunum showed blood-stained hæmorrhagic patches in its mucous membrane, which varied in length from two feet to seven or eight inches, and were separated from one another by areas of apparently normal intestine. The ileum was similarly affected, but to a less degree. In neither could any special hæmorrhagic point, or ruptured vessel be discovered. The cæcum was normal, the appendix thickened, its mucous membrane reddened and apparently inflamed; the follicles were slightly enlarged. The large intestine and rectum were normal.

There was no noticeable enlargement of the mesenteric or other lymph glands. The marrow of the sternum was red, but not increased in extent. It had not the dirty reddish grey color characteristic of leuchæmia. It may be added that the brain was not examined.

Two conditions might possibly explain the clinical and other conditions of this case: cirrhosis of the liver and leuchæmia. But there is much that can be brought against the former possibility. While enlargement of the spleen is frequently associated with cirrhosis, that enlargement is only moderate, and does not approach to the extent discovered in this case. Again cirrhosis fits in ill with the history of hæmatemesis, manifesting itself at irregular intervals over a period of seven years; and while the liver was undoubtedly cirrhotic, the fibroid change was not of either the ordinary or congenital syphilitic type.

On the other hand much may be said in favor of leuchæmia. The spleen was distinctly of the leuchæmic type; its large size and fibroid condition are both characteristic of splenic leuchæmia. The injection of the capillaries in liver and heart are in favour of this diagnosis: the hæmorrhages from the stomach and intestines also support it. The absence of any marked swelling of the lymphatic glands or of greyish red softening of the sternal marrow is not against it. Still there are difficulties in connection with this view of the case. Leuchæmia in children generally runs a rapid course, and if this be a case of the disease, we are almost bound to assume that it has had a duration of four, if not of seven years, the first hæmorrhage, of a type similar to the last, having occurred when the child was four years old. Again while the proportions of white to red corpuscles, as determined by Dr. Finley, had become increased from the normal of 1 in 300 to 1 in 80, it cannot be said that this is a very great increase, especially when the facts are taken into account that correspondingly