

bination of lesions—gastritis accompanying and being caused by either of the others, and cancer, perhaps, supervening upon ulcer. These problems in diagnosis will, perhaps, best be exemplified by a brief outline of a few cases which have come under my observation and care.

Case I.—A. F., æt. 23, barber, single. Came under my care Oct. 6th last. Family history good. Personal history good till about five years ago. General appearance and condition—Muscles soft—wasted; complexion, however, ruddy; no appearance of anæmia; heart, lungs, liver and kidneys sound. Disease, therefore, not secondary. Subjective symptoms: Pain after eating; water-brash, vomiting about half an hour after eating—vomit is bitter, never contains blood—eructations of gas, also bitter; some difficulty in swallowing food, but none in vomiting; symptoms aggravated by smallest amount of alcoholic beverage; patient, however, has always been temperate; has lost 25 lbs. in five months; trouble dates back five years, gradually getting worse. Physical examination: Other organs of body sound; emaciation; stomach distended and tender on pressure; no nodule evident, even on deep palpation.

By examination of stomach contents three hours after a breakfast of milk and lime water—nothing solid given as it would not be retained—starch granules visible under microscope; reaction acid; no free hydrochloric acid. small amount of lactic acid. Pepsin or milk ferment not tested for, as contents were too dilute.

Diagnosis—Chronic or sclerotic gastritis.

Upon what was this diagnosis based? The age of the patient while not excluding cancer rendered that diagnosis highly improbable. The character of the pain—a feeling of uneasiness increased on taking food—had not the sharp lancinating character of the pain of cancer nor the burning or boring sensation of ulcer. The duration of the trouble—5 years—would absolutely exclude the possibility of cancer from the beginning. The character of the vomit—particles of food mucus and gastric secretions—in the vomit of either cancer or ulcer blood is almost invariably found at some time or other during the progress of the disease. The absence of any appreciable tumour or induration which, if felt, would be so suggestive of