

even pain in the region of the stomach, anorexia, a ravenous appetite, nausea or even vomiting, flatulence with gaseous eructations, water-brash, constipation, perhaps alternating with diarrhoea, heart-burn, shortness of breath, palpitation, are among the most common symptoms of which a patient will complain when suffering from some chronic gastric affection. From this train of symptoms the physician is unable to learn much, except that the seat of trouble is probably in the stomach, but whether primary or secondary it would be impossible to say without further evidence. Any or all of those symptoms may be complained of in any of the chronic gastric affections. Whether in such a case one has to deal with cancer, ulcer or inflammation, can only be determined by a careful enquiry into these symptoms, the time of their appearing, the duration of the diseased condition, the character of the tenderness and pain, and a careful physical examination of the patient and a chemical and bacteriological examination of the stomach contents. As to whether the disease is primary or secondary in the stomach will in each case be determined only by a careful examination of the condition of other organs.

Chronic gastritis may be secondary to organic lesions in the liver, the heart, the lungs or the kidneys. The determination of this secondary nature of the gastritis is of the utmost importance so far as treatment and prognosis is concerned. Again, it must be remembered that we may have, and frequently do have, a combination of chronic gastric affections. Cancer and ulcer of the stomach, by interfering with the movements of the stomach, by retarding the onward flow of the stomach contents, and by lessening the amount or impairing the character of the gastric secretions, may impede the act of digestion and thus favour putrefaction and fermentation and set up a chronic inflammatory condition of the gastric mucosa. It will thus be readily seen that the diagnosis of the particular nature of chronic gastric lesions is not a simple question, but is a very complex problem. We have first to determine that the stomach is the seat of disease; secondly, whether that disease is primary or secondary to some lesion in some other organ. These points having been settled, we have next to differentiate between cancer, ulcer, gastritis, and here, as already pointed out, we may have a com-