

had it not been for the fact that the articles in the stomach could be distinctly felt, it would have been hard to believe that they were there at all. Two or three times vomiting occurred; but as the patient had been troubled the same way for some time previous to the 27th of January, it can hardly be dwelt on as a symptom of any extra disturbance.

On the 12th of November slight abdominal distension was observed, and on the 13th the articles swallowed could not be felt, this being the first day since the swallowing that they were not easily found. On the 14th they were again perceptible; and during the next month (until December 14) the patient's health was apparently quite good, his abdomen showing slight passive distension on the 25th. On December 14th tenderness was complained of, and a gradual increasing distension of the abdomen, which was supposed to be partly due to fluid. Cramps in the right side were complained of on January 13th and 14th; on the 19th vomiting occurred, the rejected matter having a very foul smell. On the 26th of January the patient felt ill, and was put to bed; he vomited frequently, and the bowels failed to move. The pulse became extremely weak, and vomiting continued on the 27th. Death occurred at 1.15 p.m. on the 27th.

*Post-mortem examination.* An autopsy was held twenty-one hours after death. Inspection showed considerable emaciation; *rigor mortis* and *post mortem* staining fairly marked; abdomen greatly distended; columnella of nose separated from alæ for a distance of one-half inch back from anterior extremity (said to be the result of thrusting fingers into nostrils).

*Section.* *Thorax:* Pleuræ, old adhesions at apices on both sides. Lungs tubercular, deposits in upper lobes on both sides, mainly miliary, a few small cavities. In the trachea, just at the bifurcation, was lodged a piece of glass—flat, four-sided, measuring  $\frac{13}{16}$ ,  $\frac{13}{16}$ ,  $\frac{4}{16}$ , and  $\frac{15}{16}$  of an inch on the different sides. The edges of the glass were sharp, and it had evidently been lying in its present position for some time; the trachea being pouched out by pressure on the right side, and the mucous membrane scarred; heart small,  $7\frac{1}{2}$  ozs., brown atrophy; pericardium healthy. *Abdomen* contained about two gallons of sero-fibrinous fluid; stomach and intestines considerably distended with gas, and their serous coats covered in patches with fibrin. On manipulation of the stomach, it was found that it contained some foreign bodies, which, with knowledge of the previous history of the case, could be made out to be knife, fork, and spoon. On close examination, the stomach was found to be strongly adherent to the ileum and transverse colon, the surface embraced in the adhesions being about the size of a fifty-cent piece; the point at which the stomach was involved was about  $1\frac{1}{2}$  inches from the pylorus on the great curvature; ileum, four inches from ileo-cæcal valve; colon, nine inches from cæcum.