

thick, greenish-yellow pus. A film made from this showed numerous tubercle bacilli. About 105 cm. from the end of the duodenum was the first evidence of ulceration of the intestine as shown by the local contraction and kinking of the bowel wall so that the false appearance of a diverticulum was produced. The contracted portion of the bowel showed a sort of transverse linear scar. In the neighbourhood of this the venules were greatly congested, the serosa cloudy with slight fibrinous deposit and there were numerous subserous tubercles of greyish or greyish-yellow appearance arranged parallel to the scar and extending along the mesenteric lymphatics so as to resemble a string of little beads. The mesenteric glands corresponding to this region were greatly enlarged and of a yellowish color.

Five cm. below this was a varicosed lymphatic vessel containing yellowish inspissated material. On further examination there were about fourteen ulcers altogether as shown by local inflammation and subserous tubercles; four or five of these formed girdle ulcers. The large bowel did not show any external evidence of tuberculosis. Just to the right of the vertebral column, lying opposite the promontory of the sacrum and occupying the whole distance from this to the level of the duodenum, was a large elevated mass of a semi-fluctuating feel and this was found to consist of hyperplastic retroperitoneal glands, which on section showed areas of opaque condensation, but without definite caseation or suppuration. The glands in the right inguinal region were found distinctly cheesy.

*Spleen.*—190 grms.; organ rather dense and of dark color. On section fairly dry. It contained numerous millet-seed-like tubercles of pearly grey appearance.

*Stomach.*—Mucous membrane slightly injected.

*Intestines.*—Duodenum dilated; jejunum normal; in the ileum, corresponding to the external appearances just mentioned were four or five girdling ulcers with somewhat thickened and inflamed looking edges, slightly undermined in places and with fairly smooth bases. Minute tubercles could be seen here and there in the bases. Besides this, other ulcers were noted which had originated in the solitary follicles and again others in the Peyer's patches, many of which presented the cribriform arrangement frequently found in typhoid fever; the serosa, however, corresponding to these showed numerous minute tubercles. At the ileo-caecal valve was a very large ulcer extending the whole length of the valve having thick edges and an infiltrated base. Two or three longitudinal ulcers of somewhat similar character were present in the last four inches of the ileum. Appendix normal; large intestine free from tuberculosis.