

availed nothing. The "corde colique transverse" was well marked in this case and was misleading, inasmuch as it was movable and associated with loss of flesh and the absence of free hydrochloric acid in the stomach contents after the test breakfast. It was strongly suggestive of malignant disease of the stomach, but an exploratory incision showed it to be the pancreas. The wound healed but the patient was not improved.

The treatment in Case No. 4 was more satisfactory, although no operation was done, under massage (general and local), suggestion and reassurance, tonics and mild aperients and the wearing of a bandage, much improvement was made and though she has not continued as well as ever, yet she is leading a fairly active life in comparative comfort.

Case No. 5. Mde. St. D., æt. 48. (Hospital No. 6,504.) Complaints were of pain in loins and a feeling of weight and distress in upper abdominal zone which was worse on the *left* side. The patient had borne thirteen children, and at the second pregnancy twins were born. Ever since this event the abdomen has been prominent and flabby. During the past twelve years flatulence had frequently troubled her; during the past five or six years vertical headaches and distress in upper part of abdomen were complained of. While always nervous she has become much more so during the past few years.

Examination of the abdomen showed it to be one of "*hängebauch*," the walls were very flaccid and pendulous, the recti abdominis were widely separated and between these muscles one could readily feel the prolapsed contents of the abdomen. On examination of the different organs of the abdomen one found the normal area of liver dullness a resonant one. This organ was movable and could, at times, be easily felt between the recti; again it was with difficulty made out, possibly becoming rotated upon its transverse and longest axis. The left kidney was felt on deep inspiration, while the spleen and the right kidney could not be felt. The stomach, on inflation, was dislocated downwards, while the measurement of the organ when distended with gas indicated some degree of dilation as well. The lesser curvature was three inches above the umbilicus, the greater four inches below this, giving the transverse measurement of the stomach as seven inches. (Fig. 5.)

This case illustrates a ptosis of the liver with gastropotosis occurring in a woman with a multiple of pregnancies and in whom the recti were widely separated, the stomach dilated and nervous symptoms manifestly exaggerated.

Case No. 6. Mrs. K., æt. 40. (Out patient.) Showed displaced stomach, freely movable and tender right kidney, with occasional vomiting; epigastric pain and tenderness with pulsating area on the left of the middle line; some frequency of micturition. *L'Épreuve de Sangle* was most satisfactory in her case, and the wearing of an abdominal support was found very helpful. (Fig. 6.)