was tender, but no blood escaped. Examined for aneurism but found no signs of tha, disease. There being no history of syphilis or of swallowing corrosive substances, no bruit or bellows' murmur at the back or front over the aorta, together with the bad color of the patient's face, his increasing emaciation, and the constant pain he felt behind the ensiform cartilage radiating from this spot, I concluded that I had to deal with a growth probably cancerous in the lower part of the œsophagus. The disease had been steadily advancing, and there had been a steady loss of weight of thirty pounds in eight months. I advised, in addition to milk, the use of finely-minced meat ard soft-boiled eggs.

October 20th.—Decided not to pass the stomach again. The patient is hoarse, voice much enfeebled, and he coughs a good deal of phlegm. He has pains in the jaws and gums as if from cold. Weight 142 pounds, pulse 83. Daily food four eggs, four pints milk, two pints broth, one slice bread.

November 3rd.—Cannot walk as well as before, the gait being feeble, though not shaky; soon gets tired. Very anæmic-looking. Pains in jaws and gums as well as the hoarseness continue. Weight  $141\frac{1}{2}$  pounds.

November 27th.—Hoarseness and pain in the œsophagus continue, also pain in the left side. Takes six eggs and one dozen oysters per diem; the oysters have to be well chewed. Pulse 99, temperature  $98^{3\circ}_{2}$ . Weight 141 pounds. Ordered enough belladonna to seat of pain and an emulsion of ol moorhuæ.

December 6th.—Takes eight eggs, four pints of milk, one and a half pound beef made into beef tea, one slice bread,  $\mathfrak{Z}$  p. emulsion of moorhuæ per diem. Pain in epigastrium and left side getting severer. Pulse 85, temperature 98<sup>°</sup>, respiration 23. Advised him to take a glass of grog so as to help him to sleep.

December 20th.—Sweats at night. Swallowing is getting to be rather difficult; cannot swallow bread or oysters last two days. Pain in side very severe. On examination found rhonchus, particularly on right side. Percussion sounds good on both sides; chest measurement on inspiration, 27 inches; on expiration, 285% inches. Weight 146 pounds, pulse 100, temperature 995°, respiration 26. Prescribed gr.  $\frac{1}{4}$  morphine to be taken at night.

January 4th, 1895.—Pain in side very severe; coughing or any sudden motion makes him suffer acute pain in the epigastrium. The huskiness is as marked as ever. Swallowing very difficult. Noticed on this and some previous occasions a very disagreeable odor when he forced air up the œ sophagus. Weight 141 pounds, temperature 98°, pulse 98, respiration 26. This was the last visit he paid to my office.

January 18th, 9 p.m.—I saw him at his house. His wife informed me that for the last two days he had spent most of the time in bed. At 6 p.m. he was quite conscious and replied to a question. Shortly afterwards he became insensible. Pulse 135, respiration 50, temperature 101<sup>3</sup>/<sub>9</sub>°. Comatose mucous rales on trachea pupils rather small and not responsive to light. No morphine had been taken during the day. In moving him the odor from the breath was very offensive.

January 19th, 3.15 p.m.—Died; no autopsy.