

GASTRO-ENTEROSTOMY IN PYLORIC OBSTRUCTION—A CASE.

An Abstract of a Clinical Lecture delivered at St. Michael's Hospital.

BY ALEXANDER MCPHEDRAN, M.B.

Professor of Medicine University of Toronto.

Rev. J. C., aged 45, has suffered from disturbed digestion for twelve or more years, being worse during the last year or two. Flatulence is the chief symptom, and, when marked, causes epigastric pain. His weight has fallen from one hundred and forty-five to one hundred and eighteen pounds; in the last few years it has not been more than one hundred and twenty-five pounds. He sleeps well; his appetite is good—in fact, somewhat ravenous at times. The bowels are constipated, but they move daily, the stools being scanty, hard and lumpy. The urine is not much below the normal in quantity, and is rather high-colored. Thirst is moderate; the skin is somewhat dry, but not harsh. Vomiting has occasionally occurred, caused by the accumulation of material in the stomach. He uses the tube once a week to give relief and prevent vomiting.

He is considerably emaciated; the abdomen is flat, with slight fulness from the umbilicus downward. When there is much food in the stomach a slight wave is easily perceived, passing from left to right over this fulness; if the abdomen is flicked with a cold wet towel, or even palpated with the cold hand, these waves become large and rounded, three of them being visible at the same time. They are not painful, in fact he is scarcely conscious of their occurrence. By palpation a very marked splash is easily produced over the prominent part of the abdomen, even six or eight hours after liquid has been taken. To the right of and above the umbilicus an oblong mass about one inch by two inches is easily felt; he discovered this tumor himself last winter. It is slightly tender and freely movable. On deep inspiration the right kidney can be palpated above and to the outside of the tumor.

A few days ago only toast and water were taken for breakfast; three hours later the stomach tube was passed and over a pint of fluid evacuated. This liquid contained the toast quite unaltered, and also potato and apple that had been eaten the day before. Much still remained in the stomach and, even after several washings, more was obtained by elevating the hips while the patient lay on his back. The acidity of the fluid was eighty and the proportion of free hydrochloric acid thirty-eight per thousand, fully double the normal. There was no lactic acid. The stomach was inflated with air to show