

Liver, left lobe enlarged to two inches of umbilicus. Right lobe extends two fingers' breadth below ribs. No pulsation. Spleen not enlarged.

Percussion.—Lungs, negative.

Heart, dulness extends nearly to nipple line, and half an inch to right of sternum.

Liver, as determined by palpation, considerable ascites demonstrated by succussion.

Auscultation.—Lungs, Negative.

Heart, systolic murmur at apex and transmitted into axilla and angle of scapula.

Urine shows slight trace of bile. No casts.

Patient was tapped by Professor Burt in his clinic and two gallons of fluid withdrawn. Hydrogogue cathartics and cardiac tonics were administered and ascites failed to reaccumulate. His strength increased and he was able to go about selling cutlery.

To exclude syphilis as a possible cause for his liver, a course of mercury and potassium iodid was given for three months. No apparent change in the size of his liver followed.

About three years ago his liver began to pulsate, and the right lobe increased considerably in size. Since then he has accumulated considerable ascites and other manifestations of disturbed compensation have occurred frequently, but nearly always cleared up under active catharsis. Paracentesis abdominalis was required only three times in six years.

PHYSICAL EXAMINATION.

Oct. 20, 1905. *Present Condition*.—*Inspection*.—Color good, and in fairly good state of nutrition. Conjunctivæ natural. Pulsating jugulars. Abdomen somewhat distended. Ankles edematous at night. Apex beat not seen.

Palpation.—Heart, heaving precordia; apex beat in sixth interspace just outside of nipple line. No thrill.

Liver, pulsating, with right and left lobes extending to one inch from umbilicus.

Spleen, enlarged, extending to one inch from left iliac crest, and to anterior axillary line.

Stomach is considerably dilated.

Percussion.—Heart, dulness nearly one inch outside of nipple line and one inch to right of sternum.

Liver, same as determined by palpation.