

opening in the gastro-epiploica dextra, 2 m. across, and with smooth edges. The papilla of the bile duct is 6 cm. below the ulcer. Nothing else of note in intestines.

CASE IX.—*Severe gastralgie attacks for six months; slight dyspeptic symptoms; hemorrhage from stomach and bowels.*

J. G., aged 45, seen with Dr. Whiteside June 13th, 1885. Patient was a large, stout man, who had been strong and healthy. He had taken alcohol freely, and of late has had business worries. No history of syphilis. He had suffered at times with dyspepsia, but, as a rule, he had a good appetite and good digestion. In February he began to have pains in the abdomen. The first attack came on suddenly one night, and was so severe that he got no sleep. They have recurred on and off ever since, most frequently at night, lasting from one to three hours. He described the pain as starting in the epigastric region and passing to the back and round the sides. He would frequently sit on the edge of the bed for hours doubled with the pain. In the intervals of the paroxysms there was a dull, heavy sensation in epigastrium. There was never any vomiting with these attacks. Food, he insisted, had no special influence one way or the other in inducing or aggravating the pain. Sometimes there was a sense of oppression after a full meal. Pressure often gave relief during the paroxysm. Since February he has not been a week free from attacks, and has lost between 30 and 40 lbs. in weight.

Inspection showed a stout, well-nourished man. Face pale, tongue lightly furred; pulse 104, tension increased. The abdomen large and fat, and in the epigastric region there was a remarkable throbbing, most distinct about two inches and a half from the ensiform cartilage, but a large wave of pulsation passed over the whole abdomen from this point. The shock, indeed, of the pulsation was unusually forcible, and was perceptibly communicated to the bed. The heart impulse was not very marked. On palpation, there was a sense of deep resistance between navel and ensiform cartilage, but no distinct tumor could be felt, no thrill. The thick panniculus, however, made the examination