

stomach. The percussion blow should be gentle and a tympanic note will be elicited, which is characteristic of the stomach. I think the best results are obtained by percussion over the neighbouring organs and gradually approaching the stomach. Thus in one direction we get the clear note of the lungs, or in other directions the dull note of the spleen or liver, and then the tympanic note of the stomach. The greatest difficulty is in distinguishing the note of the stomach from that of the transverse colon. We may assist the ear in this case in the following manner: If the colon is full of gas have your patient drink, say, a pint of water and then percuss in the upright position. The percussion note of the colon will be tympanic and that of the lower border of the stomach on account of the fluid will now be dull. The size of the stomach may be more readily made out by percussion if it has been previously distended by gas in the manner already pointed out. The only fact of diagnostic value obtained in this way is that the stomach is enlarged. This may be due to either gastritis or a cancerous or simple obstruction of the pylorus, and these are differentiated by the means previously referred to and by the examination of the gastric contents.

4. *Auscultation*.—By the aid of a stethoscope placed over the cardiac orifice, the seventh left intercostal cartilage, the passage of fluid down the œsophagus and into the stomach may be heard. With the stethoscope in this position ask your patient to take a drink of water; a spurting sound will first be heard, and then in from 5 to 12 seconds a second sound is heard, called the “deglutition murmur,” which indicates that the fluid has passed from the œsophagus to the stomach. In obstruction of the cardiac orifice this “deglutition murmur” will be delayed, sometimes as much as a minute. If the obstruction is marked regurgitation of food will take place, which upon examination will show that stomach digestion has not taken place. The usual cause is malignancy at the cardiac end of the stomach.

By giving the patient a sudden shake while your ear is near his body you may normally detect a splashing sound. This is of no significance unless heard after the usual time that the digestion of an ordinary meal occupies.

XII. THE EXAMINATION OF THE STOMACH CONTENTS.—The contents of the stomach may be obtained for examination pur-