above the umbilicus, while the latter reached within three inches of the symphysis pubis.

Analysis of the gastric contents, after an Ewald test-breakfast, gave the following result: Quantity 7 oz.; mucus slightly increased; free HCl + total free HCl, 58; total acidity, 100.

The treatment of this case was about the same as that outlined above for gastroptosis with hyperacidity. She began to improve immediately, and in three weeks was able to be about her house, and at the end of three months had regained all the flesh that she had lost during her illness.

January 3rd, 1901—The patient continues to have fairly good health, and the flabby condition of the abdomen has completely

disappeared.

CASE 3.—A. C., aged 22; mother of two children. The elder is sixteen months old, the younger four months. After her last confinement she had good health for six weeks, and had plenty of milk for her child. She began to lose flesh and to become weak. On standing for some time she would feel as if bruised about the waist, and as if a weight were attached to it. The secretion of her breasts diminished until she was forced to wean her child. She complained of palpitation of the heart; could feel something pulsating in the pit of the stomach. On examining the patient one month after she had taken ill, I found her right kidney movable and abdomen very flabby. The splashing sound could be easily made out. Digestion of food was fairly good. Her stomach was inflated with CO₂ gas and found to be displaced slightly downwards.

Treatment—abdominal bandage, light diet. The patient improved rapidly and gained in weight; and at the present time—

two months afterwards—she is strong and healthy.

CASE 4.—E. R., male; aged 42. Indigestion for ten years, but symptoms much worse of late. Complains of weakness, headache, flatulency, belching, nausea, dizziness, constipation, vomiting. Appetite fair. Always tired in the morning; physical examination demonstrated the presence of gastroptosis. Analysis of gastric contents gave the following result: Free HCl absent; total acidity, 24; mucus slightly increased; lactic acid absent.

Diagnosis—gastroptosis with atony and gastritis.

Treatment—abdominal bandage, and a diet and drugs suitable for a case of atony with gastritis.

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