

These considerations now fairly enable us to arrive at a diagnosis. Now a word as to treatment.

Had we advised the patient in an earlier stage of the disease, we should most probably have been able to considerably lengthen his days. We should, in the first instance, have stopped, once and for all, the liquor supply. I believe that no harm is ever done by cutting off stimulants. Regard a man who is habitually taking too much alcohol, or a man who has been lately drinking hard, as a man who has poisoned himself. So he has; he has taken alcohol instead of chloral, arsenic or prussic acid. This rule I have invariably followed, and no bad results have ever fallen under my notice, in spite of the gloomy predictions of the "tapering-off" system.

In addition, we should also have assisted nature in relieving the portal congestion by prescribing saline purges, assisted occasionally by calomel, blue pill or podophyllin, of which, to my way of thinking, the blue pill is by far the most effectual. Patients are prejudiced against the use of blue pill, and much has been said against mercurial purges. Don't believe it. It has never yet fallen to my lot to observe any injurious effect from the use either of blue pill or calomel in digestive disorders.

But now that the disease is in full swing, what has been done? It was thought advisable, owing to the great debility and weak cardiac action, to allow some stimulants, and on account of its diuretic action gin was administered. Purgatives, too, have been given with a view to relieve the congestion of the intestinal circulation. At first a mixture of digitalis and broomtops was taken, but finding that the daily quantity of urine passed remained small (20 ozs.), I put him on the old-fashioned pill of squill, digitalis and blue pill. This producing no better result, we prescribed acetate of potash with infusion of digitalis. It became evident that medicinal diuretics were not of much advantage. The ascites was increasing, the feet and legs were becoming enormously swollen, the infiltration spreading to the scrotum. Accordingly on the 14th of April I aspirated the abdomen, but, unfortunately, some obstruction blocked the flow of serum in the aspirator, and but six ounces were removed. On the following