

Heart: Weight 208 grams. The pericardial surface contained large, irregular masses of fat and the coronary vessels were well marked. The heart muscle was rather flabby and soft. It was dark in color and quite glassy in appearance. The ventricles were empty. The chambers were not dilated. Some fatty plaques could be seen on the aortic and mitral valves. The coronary arteries also showed this condition. Otherwise the heart valves were clear. The F. O. was closed. The A. O. measured 6.8 centimeters, M. O. 8.7, T. O. 9.2, P. O. 6.2, L. V. 2.2 centimeters.

Aorta: The aortic wall was of moderate thickness and quite elastic, and showed a large quantity of fatty streaking of the intima which extended throughout its whole length, greatly predominating along the posterior wall. On the external wall of the aorta, and particularly in the vicinity of the arch and the first part of the descending thoracic, were found a number of small petechial hemorrhages lying in the adventitia and to some extent infiltrating the connective tissue of the vicinity. These hemorrhages formed small blotches, varying from a pinhead to .75 centimeter in diameter. A similar hemorrhagic blotch was also seen at the main stem of the celiac axis. The adventitia of the abdominal aorta was free from this process.

Abdomen: The abdominal wall was very thick, due to a panniculus adiposus measuring 9 centimeters. On exposing the peritoneum, large, irregular, blotchy areas could be seen beneath it. On opening the peritoneum, which was quite thin, the cavity was found virtually filled with dark red blood forming large gummy clots between the intestinal coils. The lower border of the liver was pushed upwards under the ninth rib in the R. N. L. The small intestine was quite flat and there was no sign of peritoneal irritation throughout the abdomen, all surfaces being smooth, moist, and glistening. The great omentum was spread over the greater part of the coils of the intestine. It was very fatty. No enlarged lymph glands could be found in the very adipose mesentery. The diaphragm arched to the second rib on the right side and the third rib on the left side. Over the right lobe and upper surface of the liver, one could see a large oval dark red area, simulating a sub-capsular hemorrhage, which extended to the extreme border of the right lobe. The capsule over the area of hemorrhage was very friable and could be ruptured with ease. No adhesions could be found in the abdomen, except some recent blood clot between the upper surface of the liver and diaphragm.

Stomach: The stomach was not enlarged. The serosal surface was quite smooth and free from adhesions. When opened, the stomach contained a fair amount of thin fluid, which was free from bile. The gastric wall was of normal appearance. The mucosa was fairly thick, indistinctly mammillated and pale. There were no ulcers. The pylorus was healthy.