

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
258	Joseph Jacobs	33	Aug 11 <sup>th</sup> 86	Aug 21 <sup>st</sup>	Dr. Lebart.	3 hours.

MORBID APPEARANCES.

**General Condition.** Body well nourished - 3 punctures & one incision between axillary lines

**Pleurae - Rt. Healthy.**

**Lf.** has everywhere springing from it, a soft thick (3 inches) mass of new growth, of medullary consistency & appearance, before removing to keep the limits of the growth may be defined by a line drawn from the second right costal cartilage to the eighth left c.c.

**Lungs**  
R = 11 oz. R collapsed, not seen from front, lying almost entirely behind pericardium contains in upper lobe one nodule of new growth of size of hazel nut & several smaller ones.

**L =** deeply buried in similar mass to that lining L pleura, with scattered nodules in its substance

**Heart.** Position - with excision of portion of left apex entirely on right side of middle line the lower border lies on a line from tip of 5<sup>th</sup> R costal cartilage to eighth L. C. cart.

upper border corresponds to a line from lower margin of 2<sup>nd</sup> Right to eighth L. C. C.

**Pericard.** coats 2 oz clear brownish fluid. its nodules of new growth portion unaccounted by the heart on the left side, has its apex at tip of 8<sup>th</sup> L. C. C. outer aspect & its boundaries along line from 2<sup>nd</sup> R. C. C. & line from 5<sup>th</sup> R. C. C. to 8<sup>th</sup> L. C. C. projecting into cavity of pericard.

**Liver** enlarged & pushed down right lobe 4 lbs 9 oz reaching almost to crest of diaphragm has several scattered nodules of soft growth

Cont page 196

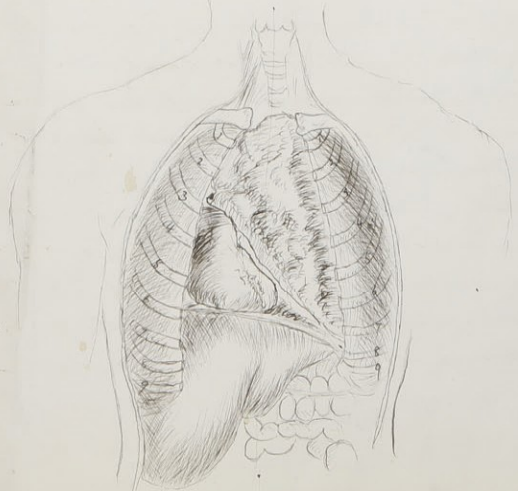
No. in Reg	NATURE OF DISEASE.
1886	
914.	Malignant disease of Pleura & viscera.

CASE.

**History.** The patient had structure of the arctura in 8<sup>th</sup> - & had some swelling of the L testicle - which was slowly afterwards - about 12 months prior to admission - removed for a suppurating tumour. The patient was well up to the 31<sup>st</sup> July when he had pain in the R side of the thorax, not constant - & dyspnoea came on suddenly on the 9<sup>th</sup> inst - proving worse daily - with much weakness.

**Admission.** A pale thin man - with shallow respirations of 18 - & pulse of 100. very weak. His heart was pushed to the R - apex in nipple line in 4<sup>th</sup> R space, the side of the L side was dull - with diminished V.T - was - tubular expiration from spine of scapula to base - blowing beating at 3.5 ft - a true R side with exception of cardiac. When the breathing was blowing - but there was no tubular measurement of chest - same increase of 2 1/4" to the L side, the lines of chest was about normal. Paracentesis was made at axil, & 3 oz of blood stained fluid drawn off - alkaline, white on boiling, sp. gr. 1020 - the last few 3 being nearly pure blood -

**Progress.** He had slight relief after the tapping - but next day the same amount of dyspnoea - & a high temperature at night - on the 14<sup>th</sup> inst a hypodermic syringe injected pretty much into the axillary site of paracentesis (L ant: axillary line) showing large cells under the microscope



He had dyspnoea continuing - slightly more bloody and 1/4 blood was drawn off - by these temporary measures - 11-12 of bloody fluid removed - He had little or no failing day by day - he was very skin & feeble pulse - His urine was slightly cast - never altered in position - than actual pain.

A. S. Griffiths.



No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
258	Joseph Jacobs	33	Aug 11 <sup>th</sup> 86	Aug 21 <sup>st</sup>	Dr. Ewart	3 hours.

No. in Reg. 1886	NATURE OF DISEASE.
914.	Malignant disease of Pleura & Pericard.

MORBID APPEARANCES.

**General** Body well nourished -  
**Condition of Pleurae** - 3 punctures & one incision between axillary lines - Rt. Healthy.  
 Lt. has everywhere springing from it, a soft thick (3 inches) mass of new growth, of medullary consistency & appearance, before removing to lung the limits of the growth may be defined by a line drawn from the second right costal cartilage to the eighth left c.c.  
**Lungs** R. collapsed, not seen from front, lying almost entirely behind pericardium contains in upper lobe one nodule of new growth of size of hazel nut & several smaller ones.  
 L. deeply buried in similar mass to that lining L. pleura, with scattered nodules in its substance.  
**Heart.** Position - with excelsion apex entirely and regular the lower border lies on a R. costal cartilage to eighth upper border corresponds to margin of 2<sup>nd</sup> Right  
**Pericard.** coats 2 or 3 clear brown nodules of new growth  
**Liver** enlarged & pushed  
 4 lbs 9 oz  
 reaching almost to  
 has several scattered  
 Cont page 196

CASE.

**History.** The patient had stricture of the urethra in 85 - & had some swelling of the L. testicle - which was slowly afterwards - about 12 months prior to admission - removed for a fungating tumour. The patient was well up to the 31<sup>st</sup> July when he had pain in the R. side of the thorax, with cough - & dyspnoea came on suddenly on the 9<sup>th</sup> inst. - growing worse daily - with much weakness.  
**Admission.** A pale thin man - with shallow respirations of 40. & pulse of 100. very weak. His heart was pushed to the R. - apex in nipple line in 4<sup>th</sup> R. space, the L. side of the L. side was dull - with diminished V.T. - was - tubular expiration from spine of scapula to base - blowing breathing at 2.5 ft. - on the R. side with exception of cardiac dulness the breathing was blowing - but there was no dulness. Measurement of chest - gave increase of 2 1/4" to the L. side: the lower dulness was about normal. Puncture was made at once, & 3 oz of blood stained fluid drawn off - alkaline, white on boiling, sp. gr. 1020 - the last few 3 being nearly pure blood -  
**Progress.** He had slight relief after the tapping - but next day the same amount of dyspnoea - & a high temperature at night - on the 14<sup>th</sup> inst. a hypodermic syringe injected pretty much into the axillary site of puncture (L. ant. axillary line) was found to contain a semi-platinum mass displaying large cells under the microscope with many bright nuclei - evidence of quick growth - His dyspnoea continuing he was again aspirated on the 16<sup>th</sup> - a 3 oz of fluid drawn off - slightly more bloody than before. Again on the 17<sup>th</sup> 3 oz of fluid (1/4 blood) was drawn off - the dyspnoea being only slightly relieved by the temporary measures - an incision was made on the 19<sup>th</sup> - a 5 oz of bloody fluid removed with a tube, which was afterwards withdrawn - He had little or no discharge from the wound next day - but failing day by day - he was gone on the morning of the 21<sup>st</sup> with clammy skin & feeble pulse - & died on the 11<sup>th</sup> day after admission - His urine was slightly albuminous - no expectoration. His heart never altered in position after tapping - & he had more discomfort than actual pain.  
 H. J. Griffiths.