

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
305	Alice Sawyer	33	8 Oct	17 Oct	Dr Dickinson	3 1/2 hrs

MORBID APPEARANCES.

HT 5ft 5 in  
wt 9 3/4 360

Body poorly nourished. PM rigidity kept all over body. There are several petechiae scattered <sup>(innumerable)</sup> on surface of body: There are some white lines on the outer side of R. leg: There is a line round the back of the right leg probably connected with varicose veins, but not distinct. The neck is very thick <sup>of full</sup> & there is a small circular ulcer on the left side, Cyanosis of L. ear; Hair brownish red. Eyes grey, pupils medium size - White lines <sup>(lines albicant)</sup> over lower part of abdomen - Circumference at Umbilicus 37 1/2 in. of Thudum

Abdomen

Piles

34 inches: There are some ulcerated ext. Piles:

Ascites

On opening abdomen a large quantity of yellow serum escaped wh. distended abdomen; and then a large nodulated mass is exposed under reflection of Peritonium: This is found to be connected with the Uterus by broad lig.:

Ovarian Tumour

23 1/2 inches in circumference

No trace of Ovary to be found, R. Ovary is atrophied: Right Fallopian tube healthy. L. Fallopian tube is elongated & extending up to & into the iliac region where it seems to be connected with this large mass; the Tumour occupied the whole of the left

Multilocular

thoracic & hypochondriac regions with the Epigastria & Umbilical regions: The Tumour was multilocular and evidently composed of cysts of varying sizes wh. contain fluid or semi-creamy material - On Section the Tumour is found to be composed of a fibrous stroma, & a certain amount of fleshy Sacromatous looking material, in wh. are scattered thin

No Haemorrhage

Liver

fatty

Spleen

Kidneys

Uterus

cysts: There is no sign of Haemorrhage to be found: Ant. edge usual thickness, capsule smooth, & on section is fairly firm but unequally congested & fatty in pale, soft, & large:

are apparently normal with the exception of flattening of left kidney: Uterus can't large walls normal

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Fatty Heart - Collapsed lung: Ovarian Tumour + Ascites:

Quinn's

CASE.

History.

The patient has been married for nine years and had had five children all of whom were alive. About 18 months before she came to St George's the woman fell down and hurt herself - but not seriously. She was pregnant at the time - but her attention was called to the fact that her abdomen was of abnormal size - a fact she had not noticed before her accident. A child was born three weeks before the woman came into the Hospital. The patient gave no history of having had ague - but she had lived at Brampton where (I believe) malaria is not unknown.

Post-mortem

The woman was anemic, her aspect cachectic. She complained of abdominal swelling and of weakness.



A. hard edge  
B. notch  
C. edge not felt

Her appetite was bad, her tongue was nearly clean. Her bowels were open. No cardiac murmur was heard. The base of her right lung was cracking in respiration, breathing sounds were harsh crack and crack were common expirations. There were also crack expirations at the base of her left lung and breathing sounds were harsh there. Her abdominal veins were enlarged and prominent. A hard abdominal tumour was felt in the parasternal space in the diaphragm. The urine was of normal colour, acid. Sp. gr. 1026 and it contained no albumen.

Diagnosis  
Crown  
&  
Enlargement

The tumour was diagnosed as an enlarged Spleen - (a notch was distinctly felt) Examination of the Spleen showed no increase in the number of the white corpuscles. It was found that there was an ascites. The patient was:

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MORBID APPEARANCES. Continued

R. Pleura  
filled with fluid  
Lungs

R. Pleura divided into fluid (serum) & the lung is collapsed and sinks: Left Pleura is healthy, the left lung is congested & is crepitant all over and feels carnified. There are milk patches all over surface of ant. & ext. of R. Ventricle & also the ant. & ext. surface of the L. Ventricle: R. Ventr. contains a small pale clot. L. Ventricle in same condition - the walls are pale flabby & thin: Aortic valves Nat. Pulmonary also natural: Mitral valve admits tips of two large fingers, the Tricuspid 3 such fingers. The valves are quite healthy.

Weights

<u>Lungs</u>	R = 907
	L = 1907
<u>Heart</u>	907
<u>Liver</u>	4lbs 207
<u>Kidneys</u>	R. 407
	L. 307

J. S. Standford  
p. 70 D. Delapine

No. in Reg.  
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NATURE OF DISEASE.

CASE.

with Linnæi and Put.

She had abdominal pain and was treated with brandy and opium for several days.

On Oct 14<sup>th</sup> breathing sounds were deficient at the base of the woman's right lung.

vomiting and abdominal pain were the most troublesome symptoms.

On Oct 17<sup>th</sup> the patient had an attack of dyspnea and great abdominal pain. She rapidly became febrile and died.

Richard S. Sully.