

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after Death.
	Charlotte Lanchbury	54	15.10.20	22.11.20	D Latham	8 hrs.

MORBID APPEARANCES.

A well preserved body. Rigor mortis present. No oedema of lower limbs. Anterior half of left lower limb shows brown pigmentation. ~~on~~ the skin. Varicose veins of both legs present. ^{Brown} Pigeon-hole spots scattered over front of R. thigh $\frac{1}{2}$ in in diameter others over front of arms ^{of both} Superficial veins well marked on arms. Marks of old vaccination on both deltoid regions. One or two livid spots on front of forehead.

Brain membranes: Ill. There is slight congestion of the vessels but no haemorrhage gross or petechial. There is no evidence of the pons. Convolutions are well preserved & ventricles are normal.

Lungs & Trachea: No obstruction. No oedema. No haemorrhage. Thyroid: normal.

Placenta: Slight adhesions over both lungs. No fluid in cavities.

Lungs {R: $\frac{4}{8}$ } Both lungs show a slight degree of Emphysema there is no consolidation. Lobar & lobular and no evidence of old tubercle. There are no infarcts haemorrhagic or otherwise.

On the ^{superficial} surface of the left lung there are a few subpleural Ecdyemosa.

Pulmonary vessels: No embolism. Bronchial glands: very deeply pigmented black.

Pericardium: adhesion to heart but can be stripped up with some difficulty. No fluid.

Heart: 10 g. Enlarged. Whole of R. ventricle embedded in fat as far as apex. There are a few petechial spots on surface of left ventricle. Pulmonary and aortic valves competent. No cupidifice admits fingers mitral 3. There is no thickening of the cusps and no vegetations are seen. On the anterior cup of the aortic annular surface, there are a few small haemorrhages. Myocardium of left V. is somewhat hypertrophied but is very thin at the apex where it has been encroached on by fat. The muscle is friable soft.

Coronary vessels are arteriosclerotic; No thrombosis.

Peritoneal cavity: No peritonitis. No free fluid. No tubercles seen.

Liver 4 lbs. 2 oz. projects for 2" below costal margin, its misshapen and presents a sinuopertous form on upper surface. No pericholecystitis. Surface smooth. No cirrhosis. Consistent presents congested appearance dark red. Fatty colour change not evident. The tissue is friable soft.

Gall bladder contains bile and some granular calcareous debris. Ducts patent. Glands of neck of liver are deeply pigmented black.

Spleen 7 g. No perisplenitis. No infarcts. Section is dark red to firm consistency. Organ is not enlarged.

Pancreas ~~superficial~~ Normal. No pancreatitis.

Suprarenals healthy. No haemorrhages.

No. in Reg.
192...

NATURE OF DISEASE.

Subacute Nephritis, Fatty degenerating heart + acute dilatation.

CASE.

FATTY DEGENERATION OF HEART

1. Charlotte Lanchbury. 54.

M.R. 977/20
P.M. 252

History. Six weeks ago she began to vomit and had pain in the stomach and in the legs, she also had an outbreak of purple spots on the legs.

On Admission. Temp. 99. Healthy appearance.

The heart was slightly enlarged, nothing else abnormal is noted.

On both legs were some old patches of varicose ulceration with discoloured petechial areas. The urine contained blood and albumen. Spleen not palpable.

Course.... Red cells and a few casts were found in the urine but no organisms. Albumen 2%. Treated on simple diet Pt. vomited small amounts every few days but on the whole seemed to be making a slow improvement. On the morning of 22-11-20 she died suddenly after drinking her morning aperient.

H. P. D. 22

widespread

Stomach contents -

No evidence of irritation or inflammation. No ulceration. No haemorrhages. Contents of intestines pale yellow in colour. No sign of melæna.

Appendix healthy.Genital organs :-

Ovaries atrophic. No cysts. Tubes normal. Uterus: wall cutaneous several small fibroids, largest about size of walnut. There is also a small polyp protruding from the os uterini & attached to the cervical mucous membrane.

as. haki is
with paler
tans
atrophied
The vessel
places are
fair.

No.	NAME.	Age.	Admitted.	Died.	Under the care of	Examination, at what time after Death.
	Charles Lanchbury	54	15.10.20	22.11.20	D Latham	8 hrs.

MORBID APPEARANCES.

A.
An.
The
in
S.
L.
B.
G.
L.
P.
L.
L.
L.
A.
P.
P.
V.
D.
M.
A.
F.
A.
C.
P.

Peritoneal Cavity - 110 peritonitis - 110 pro fusis - 110 tubercles - none.
Liver 4 lbs. 2 oz. projects for 2" below costal margin, is misshapen and presents
 anisotropic form on upper surface. No perihepatitis. Surface smooth. No cirrhosis.
 Cross-section presents cupped appearance dark red. Fatty colour change all evident -
 the tissue is friable soft.
Gall bladder contains bile and some granular calcareous debris. Ducts patent.
 Glands or not given are deeply pigmented black.
Spleen 7 g. 110 perisplenitis: 110 infarcts. Section is dark red & firm -
 consistency. Organ is not enlarged.
Genitourinary - Suprapubic Normal. 110 pancreatitis -
Suprapubic healthy. 110 haemorrhage.

No. in Reg^d
192...

NATURE OF DISEASE.

Subacute Nephritis, Fatty degenerating heart + acute dilatation.

CASE.

Kidneys - } Rt. 12 g.
 } Lt. 10 g.
Capsule strips with some difficulty leaving a slightly granular surface. latter is
 much mottled, dark congested areas alternating in an irregular way with paler
 areas. 110 cysts - no haemorrhages seen. On section both present the same
 appearance. The superficial & deep cortices are very considerably atrophied.
 They as well as the pyramids are pale, the former much more so. The vessel
 markings are very irregular and interrupted and ~~are~~ in some places are
 not seen at all. No cysts are present - no infarcts. Pelvis contains
 considerable amount of fat.

Urinary bladder normal. No haemorrhage.

Stomach & intestines - 110 evidence of irritation or inflamⁿ. No ulceration. 110 haemorrhage.
 Contents of intestines pale yellow in colour. No sign of melanosis.

Appendix healthy.

Genital organs - Ovaries atrophic: 110 cysts. Tubes normal. Uterus: wall contains
 several small fibroids, largest about size of walnut. There is also a small
 polyp projecting from the internal os & attached to the cervical mucous membrane.