

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
375	Abraham Colau	42	Nov 11	Dec 7	D. Dickinson	31 hours

MORBID APPEARANCES

**Gen. Appear.**  
**Cutaneous Vein**  
**Markings.** Height 6 ft 2 in. Hair long. Body fairly well nourished. Markings of cutaneous veins over thorax, arms & thighs, very distinct - a few old fibroid adhesions on left side.

**Pleura.**  
**adhesions**  
**Congestion.** Each lung on section of a dark red color, crepitant though less than usual floats in water - vessels unusually full of blood.

**Heart.**  
**Normal.** 12 oz. Uncontracted. Blood in the Cavities fluid - All valves & orifices normal - Endocardium blood stained -

**Calcaneous**  
**Plate** Calcaneous ring  $\frac{2}{3}$  round the aorta, and about half an inch wide, slightly above the valves -

**Abdomen**  
**Fluid.** Greatly distended & contained about 5 or 6 quarts of a slightly opaque amber colored fluid - No recent lymph on the visceral or parietal portions of the peritoneum nor were any flatus floating in the fluid -

**Liver**  
**Fatty Change.** 5 lbs 1 oz. Capsule thickened & whitish a number of adhesions to diaphragm & neighbouring viscera. On section soft & pulpy & pale, presenting much the appearance of a liver meal porridge. Gastrohepatic Omentum thickened. Gall bladder not distended, bile normal.

No. in Reg' 1882	NATURE OF DISEASE
1467	Ascites. Thickened Peritoneum, Gumma in Spleen - Congestion of Lungs.

CASE

376. Continued - Abraham Colau.

**Spleen.** 1 lb 6 oz. Capsule thickened & whitish in thickened parts. On section a number of yellowish white nodules seen, they cut firm, vary in size from that of head of a pin to a good sized pea. Immediately under the capsule is the largest - about size of cherry. The remainder of spleen healthy - Firm abnormal adhesions to neighbouring viscera.

**Kidneys** 17 oz.  
**Fatty Change** Capsule not adherent. Cortex soft & flabby & of a mottled pale color. Vessels unusually full of blood. Pyramids normal.

D. W. Ross

the 8 years since birth or of any other heavy pain in the abdomen. In patient of 22. 1870 some of legs but some was tender throughout - at first by purgation 6 weeks in the hospital died, and the all work as a painter redema of the legs with ironing & high. Respir. much tympanites were adon with of of the murmur red, bilious, of flatus, some gnawing abdominal. The lower edge of each ribbed abdom. or abdom. walls high coloured & the was accompanied by acute abdominal pain, which not relieved with opium failed to relieve. On Dec. 2 urine of pale straw coloured fluid were withdrawn, from the abdomen; temporary relief with use of temp. to 103° abating next day. Acute pain returned on Dec. 7. Urine very highly albuminous, turbid fluid were withdrawn when his temp. was already 104°. Death ensued in 8 hours. A. T. Myers.



No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
375	Abraham Colau	42	Nov 11	Dec 7	D. Dickenson	31 hours

MORBID APPEARANCES

Gen. appear.  
Cutaneous  
Mandrill sp.

Pleurae  
adhesions  
Congestion

Heart  
Normal.

Cutaneous  
Plate

Abdomen  
Fluid.

Liver  
Fatty change

adhesions

On section of the peritoneum, showing much the appearance of a liver meal porridge. Gastro-hepatic omentum thickened. Gall bladder not distended, bile normal.

No. in Reg.  
1882

NATURE OF DISEASE.

1467.

Ascites. Thickened Peritoneum, Gummata in Spleen - Congestion of Lungs.

CASE

History.

He served in the Army & Navy at 16-34 and during the 8 years since then has been a painter. He gave no history of syphilis or of any renal illness before 1879 when he began to notice much heavy pain in the right flank with much vomiting & dyspepsia. He had been accustomed when a young man to drink heavily of spirits. During 1880 there was slight oedema and much tympanites. He was admitted as In Patient of 22.1880 (no. 1014) and was then pale & sickly looking, with no oedema of legs but some ascites & tympanites & much albuminuria. The abdomen was tender throughout - no enlargement of liver or spleen detected. Treatment at first by purgation & digitalis; afterwards by Potassium Iodide. After 6 weeks in the hospital and 8 weeks at home the ascites was much reduced, and the albuminuria very much lessened. He then was able to resume his work as a painter until a fortnight before his readmission when slight oedema of the legs set in and after a week rapidly increased.

On admission, Nov. 11. Williams 2. A pale sickly looking man with iron grey hair - no blue line on gums. P. 76. Respiration not high. Respiration slightly embarrassed. Moderate oedema of legs: much tympanites with slight ascites - Tenderness over the transverse colon with much feeling of constriction there. Heart a soft systolic murmur audible at the right base. Urine high coloured, bilious, sp. gr. 1024 alt. = 1/4: granular casts.

Prognosis.

He lay in a restless uneasy condition complaining of flatulency, some dyspepsia, nausea etc but chiefly of aching or gnawing abdominal pain chiefly in the hypochondriac regions. The lower edge of the liver could not be distinguished & he much resisted abdominal examn. There was never any oedema of scrotum or abdominal walls without of leg slowly disappeared. The urine grew less high coloured & the albuminuria (a month) sank to 1/6. sp. gr. 1020. His flatulency grew very distressing & was accompanied by acute abdominal pain, which not relieved with friction failed to relieve. On Dec 2 vomit of pale straw coloured fluid were vomited from the abdomen; temporary relief with rise of temp. to 103° during next day. Acute pain returned on Dec 7 but from highly albuminuria turbid fluid were voided, even when his temp. was already 104°. Death ensued in 8 hours.

A.T. Myers.