

On arriving at the hut, I found the woman lying in bed covered with some 4 or 5 blankets and making the most noisy belches, it has ever been my lot to hear. So loud were they that one could plainly hear them at a distance of 50 yards from the house.

This I was told had been going on constantly every 10 seconds for the past 2 days and nights. I also discovered that she had not passed wind or motion for three days. There had been no vomiting. On examination, I found that the patient's pulse, though somewhat fast, 110 to the minute, was of good quality. Abdomen was somewhat distended but quite soft and compressible. The epigastric region was perhaps somewhat more distended than other parts. No other signs or symptoms were to be made out. Expecting that there might be some obstruction of the bowel, my treatment was a large dose of castor oil followed later by an enema. This had not the slightest effect and the following day on again being called in, I found the patient still emitting the same noisy and disgusting eructations, and I was told she had continued doing so since my visit on the previous day. Pulse was slightly quicker, bowels had been well moved.

A happy thought then struck me that it might be a similar condition to one, I had seen in a young girl, aged 15, in the London Temperance Hospital under Dr. Fenwick, and following up the same line of treatment I had seen him use, I administered the stomach tube threatening at the same time to use two tubes instead of one the following day if her condition had not improved. From that moment, she completely recovered.

I have every reason to believe it was an exactly similar case to that of Dr. Fenwick's which I believe he described as Hysterical Belch produced by swallowing air and immediately bringing it up again with a loud report.

If you consider this case of sufficient interest, will you kindly publish it in one of your numbers of the "*Indian Medical Gazette*."

Yours faithfully,

74TH PUNJABIS, SAUGOR, } CHARLES J. BRIERLEY,  
29th August 1906. } Lieutenant, I. M. S.

### "SPONTANEOUS RUPTURE OF SPLEEN."

To the Editor of "THE INDIAN MEDICAL GAZETTE."

SIR,—May I crave your indulgence in allowing the following case a corner in your valued journal.

Karamchand, aged about 45 years, residing at Hardoi, who was addicted to drinking alcohol to excess and smoking charas, fell down unconscious in a lane while walking on the afternoon of 13th August 1906 and died immediately.

Result of *post-mortem* examination is as follows:—

External body was very much emaciated. Head, brain was congested, sinuses were engorged with blood. There was serious effusion in the ventricles of brain.

Lungs, congested but normal. Heart, pericardium much thickened and adherent in patches. Both chambers full of blood. Liver pale and anemic and hardened, probably due to cirrhosis.

Spleen: there was no mark of external injury on the part corresponding to the region of spleen. Abdominal cavity was full of serous blood. Spleen was ruptured; the tissue was so soft, friable and pultaceous that not an inch of the solid tissue could be taken out entire. It was lying in a thickened and stiff capsule which shewed as if it was a bag containing the pultaceous mass.

The stomach was thickened and congested. The veins were prominent and congested. These changes were more prominently marked at its cardiac end. Kidneys congested.

From the *post-mortem* appearances there is no doubt that the patient was suffering from chronic alcoholism.

The reason for publishing this case is the rarity of spontaneous rupture of spleen even in alcoholic persons. In chronic alcoholism the morbid appearances are as a rule increase of fibrous tissue in the organs and hence cirrhosis of liver and congestion and enlargement of spleen, but in this case the spleen tissue was quite soft and friable. It had not undergone the lardaceous change for it had not the appearance of sago spleen as described in books; and generally lardaceous changes take place in the other organs if one organ is affected. The rupture was quite spontaneous, probably due to contraction of extraordinary muscles of respiration brought to head in a fall, for there was no history to suggest that the man was given a blow in the splenic region or that while falling down he hit himself against a hard substance in the splenic region. I should thank your readers very much if they have come across such cases in their practice.

Lastly my thanks are due to Dr. Wazir Sing, Civil Surgeon, for allowing me to take notes of this case.

HARDOI, OUDH, } J. P. MODI, L.R.C.P. & S., E.L.F. P.S.G.,  
20th August 1906. } Civil Assistant Surgeon.

## Service Notes.

THE Commander-in-Chief in India is pleased to make the following appointment:—

### Brigade Staff.

Lieutenant-Colonel D. French-Mullen, M.D., Indian Medical Service, to officiate as Principal Medical Officer, Sirhind and Jullundur Brigades, *vice* Colonel H. Hamilton, M.B., C.B., V.H.S., Indian Medical Service, granted leave out of India.

Information of the death of Maung Po Pe, Hospital Assistant, No. 253, 4th Grade, on the 25th June last, whilst in the execution of his duty, has been received by the Inspector-General of Civil Hospitals with deep regret. He wishes to place on record the statement which accompanied the report of his death, as furnished by Major C. E. Williams, I.M.S., Health Officer, Rangoon, and with which he fully coincides:

"He has been employed on Plague duty in Rangoon for a greater part of the past twelve months, and had shown himself to be a very energetic, capable and trustworthy officer, whom it would be difficult to replace."

Captain H. A. Williams, M.B., I.M.S., assumed charge of special Plague duty with the Rangoon Municipality on the forenoon of the 18th July 1906.

Third Class Military Assistant Surgeon H. J. Willes made over, and Captain C. M. Mathews, I.M.S., received charge of the Civil Surgeony of Kengtung (Loimwè), Southern Shan States, on the afternoon of the 4th July 1906.

### MAJORS TO BE LIEUTENANT-COLONELS.

Dated 1st April 1906.

George James Hamilton Bell, M.B.

The King has also approved of the retirement from the service of the undermentioned officer:

### Indian Medical Service.

Major Joseph Orphine Pinto. Dated 31st March 1906.

### Appointment of Specialist Medical Officers.

Dr. Rutherford, on Wednesday, July 25th, asked the Secretary of State for India: How many Indian Medical Service officers have been appointed as specialists under the Indian Army Order regarding specialists' appointments, in India, how many officers so appointed by the Director-General of the Indian Medical Service have received the special remuneration authorised for such appointments; and how many are natives of India.

Mr. Morley: I have no information as to what steps have been taken consequent on the publication of the India Army Order referred to by the hon. member, but I will inquire.

Captain H. H. Knapp, M.D., I.M.S., assumed charge of his duties with the Port Health Department, Rangoon, on the forenoon of the 26th July 1906.

Major H. Smith, I.M.S., made over charge of the duties of Superintendent of the Jullundur district jail, to Assistant Surgeon Kidar Nath Bhandari, on the forenoon of the 30th July 1906.

Captain W. R. Clark, I.M.S., made over charge of the duties of Superintendent of the Ambala District Jail, to Captain J. Stephenson, I.M.S., on the afternoon of the 14th July 1906.

Assistant Surgeon Kidar Nath, Bhandari, in charge of the Civil Hospital, Jullundur, is appointed to officiate as Civil Surgeon of Jullundur, in addition to his own duties, with effect from the forenoon of the 30th of July 1906, *vice* Major H. Smith, I.M.S., proceeded on leave.

ON return from the privilege leave of absence, Lieutenant-Colonel S. Little, I.M.S., Civil Surgeon, resumed charge of his duties at Rawalpindi, on the forenoon of the 24th of July 1906, relieving Captain F. A. F. Barnardo, I.M.S.

MAJOR H. SMITH, I.M.S., Civil Surgeon, Jullundur, has obtained privilege leave of absence for one month, with effect from the forenoon of the 30th of July 1906.

MAJOR C. MILNE, I.M.S., Civil Surgeon, Fyzabad, privilege leave for twenty-one days, from the 5th September 1906.

THE services of Captain C. J. Robertson-Milne, I.M.S., are replaced at the disposal of the Government of India in the Home Department, with effect from the afternoon of the 30th of June 1906.