CASE
OF
LACERATION
OF THE
INTERNAL COAT OF THE
STOMACH AND DUODENUM,
BY
VOMITING.

By **THOMAS CHEVALIER, Esq. F.L.S.**
SURGEON EXTRAORDINARY TO THE PRINCE REGENT, AND SURGEON
TO THE WESTMINSTER GENERAL DISPENSARY.

Read May 10, 1814.

— Froome, aged 14, went out on Saturday, 25th of Dec. 1813, to a Christmas feast, ate heartily and drank rather freely of gin and water; on the evening of the following day he became sick, and vomited violently. The vomiting continued, at intervals, during the whole of that night, and the following morning. He went out, however, for a short time, but felt very ill; and said to one of his companions, that his blood was boiling at his heart, and that he thought he should die; and begged he would come to his funeral, if it were so. He soon returned home, and about

2 o'clock on Monday afternoon, he became short-breathed, unable to swallow, and felt great anxiety, with almost continued efforts to vomit. These symptoms increased till the following day, when my friend Mr. Lightfoot of Oxford Street saw him, and thinking his situation dangerous, desired that I might be sent for.

I visited him about noon; his appearance was extremely affecting; his countenance was flushed and turgid; his breathing anxious and interrupted; his pulse very irregular, and his extremities cold. He complained of great uneasiness at his heart, which was increased by pressure near that viscus, the action of which consisted in the successive repetition of three irregular strokes; the first rather violent, the second feeble, and the third still more so. His attempts to vomit were frequent and most distressing, and generally terminated in the discharge of white froth. When he attempted to drink, the effort to swallow was accompanied by a violent and agonizing spasm of the pharynx, which made him dash the cup from his hand. Pressure on the region of the stomach, particularly towards the right side, occasioned him a great increase of pain, and an immediate recurrence of the efforts to vomit. Towards the evening he vomited in successive efforts near two pints of blood; after this he became easier, and said he should like to eat something; toasted bread was given him, of which he ate two pieces rather eagerly, but the

vomiting speedily returning, he threw up what he had eaten, and soon after this a quantity of something which he said was so bitter it was enough to kill him. Almost immediately after this he expired.

I opened the body the following morning. The left lung was found to adhere to the pleura very generally; in every other respect the thoracic viscera were healthy. The heart and every thing connected with it appeared entirely in a natural state. The viscera of the abdomen also appeared to be healthy externally, but in laying open the stomach and duodenum the internal coat of both appeared to be torn in various places. These lacerations were much larger in the duodenum than in the stomach; and near the pylorus they extended nearly round the circumference of the gut, and rendered this part so weak that it was quite torn off in a very slight effort to loosen this portion of the intestine for the purpose of passing a ligature round it. Two extensive lacerations were also found near the middle of this portion of the intestine. All the remainder of the intestinal tube, and also the whole of the œsophagus, and all the rest of the abdominal viscera, were perfectly free from any morbid appearance.