It appears he was walking down from Mount Aureol Barracks to Freetown, and must have missed his way (being new to the place), and in coming down a narrow path he slipped and fell a distance of about ten feet into a shallow stream, his right side coming in contact with a flat stone in the centre of the brook.

The man was under the influence of drink at the time. I examined the body at once and the only external marks were two small bruises over the region of the liver. At 7 a.m. the next morning (January 2nd) I made a post-mortem examination. On opening the abdomen a quantity of clear serum escaped followed by blood-stained fluid; the intestines were covered with thick blood-stained lymph, and the stomach was distended with fluid which smelt strongly of alcohol.

On removing the liver an enormous rupture was found (about 8 inches in length, almost through the right lobe, with several small fissures branching off from the main rupture). The liver was not enlarged, did not feel soft, and weighed 56 ounces.

The accompanying photograph will show the extent of the lesion better than any description. All the other abdominal organs were healthy, and there were no fractured ribs. The brain was healthy with the exception of slight congestion of superficial blood-vessels. There was no fracture of any of the cranial or spinal bones.

REPORT ON FIVE CASES OF BILHARZIA.

By Lieut enant-Colonel D. WARDROP.
Royal Army Medical Corps.

Five cases of bilharzia have recently come under my notice which call for comment.

CASE 1.—Private Raybould, 2nd South Staffordshire Regiment, proceeded to South Africa in November, 1902, and remained there until May, 1903, when he returned to England. In November, 1904, he went to India. Up to this time he had enjoyed good health and is positive that he never had any haematuria or urinary trouble of any sort. In September, 1905, while serving in Allahabad, he went sick with symptoms of bilharzia, and eggs were found.

CASE 2.—Private Pedley, 2nd South Staffordshire Regiment, was in South Africa from August, 1901, to February, 1903, when he proceeded to India and was quartered at Allahabad. He had good health and had no sign of urinary trouble until October, 1905, when he began to have pain on micturition and passed blood. He was found to be the subject of bilharzia.

It will be seen that both these cases were in men of the same regiment. Both had been in South Africa, but both had left it for considerable periods—about two years and a half—before the symptoms of
Clinical and other Notes

bilharzia showed themselves. On questioning the men the fact was elicited that another man in the regiment was the subject of this disease but had been discharged from hospital cured.

Case 3.—Private Allatt, 2nd Yorkshire Regiment, was in South Africa for two years and a half and had very good health all the time. Left the country in November, 1903, for India. He had no urinary trouble up to the summer of 1904, when haematuria and penile pain commenced and have continued ever since.

Case 4.—Private Bottomley, West Yorkshire Regiment, contracted bilharzia in February, 1906, after a six months residence at Mian Mir. He had never been out of England before he proceeded to India.

Case 5.—Private Mitchell, Argyll and Sutherland Highlanders, had never been abroad until he went to Poona. After being stationed there for six months he proceeded with his regiment for manœuvres to Secunderabad, and after having been there about ten days he developed bilharzia, the infecting locality being, in all probability, Poona.

These five cases, when they came under my notice, had all marked symptoms of bilharzia, and eggs were found in each.

The interesting fact in connection with the series is the source of origin of the attacks. The two last cases were undoubtedly infected in India, the actual localities being Mian Mir and Poona. As regards the other three, a more than strong presumption exists that they were also contracted in that country. The period of incubation could not possibly extend to the long time which elapsed between the men’s departure from South Africa and the onset of the disease, and the theory that the Bilharzia haematobia, in some portion of its unknown life, may have remained in their clothing, seems too improbable for credence. If we exclude it the fact must be accepted that all five cases were contracted in India.

A CASE OF RUPTURE OF SACCLULAR ANEURYSM OF THE FIRST PART OF THE AORTA.

By Captain N. J. C. Rutherford.
Royal Army Medical Corps.

Colour-Sergeant X., 1st Battalion Grenadier Guards, age 32, service fourteen years, was admitted to the Queen Alexandra Military Hospital about 3 p.m., on February 3rd, 1906.

History as follows: was quite well that morning; came up from Aldershot with two comrades to see a football match. He appeared all right in the train until half the journey was over, when he told his friends he was feeling sleepy and settled back into the corner of the carriage as if to have a nap. Before the train arrived, it was noticed that Colour-Sergeant X. was in a strange condition, his head rolling about and his