A CASE OF PEPTIC ULCER WITH VERY HIGH ACIDITY.

Mr. Devasia, age 23 years, was admitted iu the General Hospital, Trivandrum on 21—1—1949.

on Admission.

Temperature, Pulse and Respiration Normal.

Past History. Pain in tho abdomen for 2 years.

Present illness Started one month ago with server pain in the abdomen immediately after food, acid eructation and heart burn. Voluntary vomiting used to relieve pain.

Condition on admission. A fairly well nourished man, not anaemic, skin dry.

Physical condition Tenderness over the right hypochondriac region. Heart and lungs normal B.P. 130/90.

Laboratory findings.

Urine: Reaction—acid—albumin nill—sugar nil.

Bowels: Normal, no amoeba or cyst found.

Fractional test meal: showed hyperchlohydria.

REPORT ON FRACTIONAL TEST MEAL ON 1—2—1949.

Gastric juice.	Total acidity c.c. N/10 NaGH%	Free Hcl. c.c. N/10 Na GH%	Organic Acid	Mucus	Bile	Blood	Starch	Remark
Resting juice	110	90	—	—	—	—	—	26 c.c.
¼ hr. after	100	80		—	—	—	—	
½ hr. after	78	60		—	—	—	—	
¾ hr. after	90	72		—	—	—	—	
1 hr. after	92	75		—	—	—	—	
1¼ hrs. after	83	70		—	—	—	—	
1½ hrs. after	78	65		—	—	—	—	
1¾ hrs. after	74	62		—	—	—	—	
2 hrs. after	70	60		—	—	—	—	

Report on barium meal: Pylorus highly spastic Duodenal cap shows no organic deformity, but is spastic and tender. 3 hours residue—but empty in 6 hours. Colon appears normal.

Treatment given before operation.

Mist. Triple carb. 1 oz. T.D.S.

Hookworm treatment was also given.

Diagnosis: Duodenal ulcer with hyperchlorhydria.

Operation. On 8—2—1949 at 10 a.m. Laparotomy by left para mevian incision under light spinal was done after general preparations. Left lobe of the liver separated from the diaphragm by cutting the triangular ligament and separating adhesions. Liver pushed to the right and cardiac end of the stomach and oesophagus cut transversely and the anterior surface of the oesophagus exposed. The left branch of the vagus identified and cut and ligatured. The posterior surface of the oesophagus exposed by turning round using gauze, and the right branch of the vagus cut and ligatured. Liver put back in position. Posterioa gastro-jejunostomy was done. Intravenous glucose given during operation. Patient was quiet after the operation, condition fair

Progress: (On 8—2—1949 at 4 p.m.) Rectal Saline drip started. Ryles tube passed Not much retention. Tube left in anb stomach was washed every hour with sterile water. Not much retention each time. I.V. glucose 50 c.c. and calcium gluconate 10 c.c. morphia 1/6 gr. were given.

(On 9—2—49) Tube removed; stomach wash given 6th hourly. Not much retention. Subcutaneous saline 1 pint, Intravenous glucose 50 c.c. and calcium

gluconate 10 c.c. strychinine 1/60 gr. in 1 c.c were given Penicillin started 500,000 unitsin 25 c.c. distilled water, 1 c.c. given 3 hourly. Pulse rapid. Had a temperature of 100. 8'F.

(On 10—2—49) Stomach wash only twice daily. Not much of retention. Patient's appetite fair. General condition good. Penicillin continued. I.V. glucose 50 c.c. given. Glycerine enema given. Had a temperature of 103 degrees. Pulse good.

(On 11—2—1949) Stomach wash stopped. Put on milk and white of egg diet. Penicillin cotinued. I.V. Glucose 50 c.c given. Temperature normal Pulse good.

(12—2—1949) Condition improved. Penicillin and I.V Glucose discontinued glycerine enema given.

(13-2-49) Particulars nil.

(14-2-49) Enema given.

(15-2-49) Bread and liver added to diet.

(18-2-49) Sutures removed. Conjee was given.

(19-2-49 Patient is allowed to sit up on the bed.

(24-2-49) Fractional test meal on 24. 1949.

Gastric Juice.	Total acidity c.c. N/10 NaGh%	Free Hcl c.c. N/10 NaGh%	Organic acid	Mucus	Bile	Blood	Starch	Remarks
Resting Juice	15	2	...	...	...	...	...	28 c.c.
¼ hr. after	14	0	...	...	...	...	...	...
½ hr. after	10	0		...	...		...	
¾ hr. after	10	0		...	...		...	
1 hr. after	12	0		...	...		...	
1¼ hrs after	22	4		...	...		...	
1½ hrs. after	20	3		...	...		...	
1¾ hrs. after	10	2		...	...		...	
2 hrs. after	20	3		...	...		...	

2. 3. 49. Patient was discharged well.

I am thankful for he assistance Dr. V.K. Kungukrishnan has given me for this case study.

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DONATIONS

Donatians for the General Work of the T.N.A.I.

	Rs.	A.	P.
Previously Reported:—	11,338	6	2
Mr. N. Yesuratnam ..	2	0	0
Per Miss E. Arathoon—Nursing Staff Allied and Dufferin Hospital, Bareilly	110	0	0
Interest on Endowment Fund ..	67	4	0
Miss I. Keymer ...	8	0	0
Per Mrs. Gibbs ...	7	0	0
	11,532	10	2

Special appeal for endowment Fund required Rs. Eight Lakhs.

Previously reported:—	41,819	13	9
Nursing Staff, Islamia Hospital, Calcutta	15	0	0
	41,834	13	9