of response of this organ to stimulation during life.

REPORT ON THE BACTERIOLOGICAL EXAMINATION.

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It is obvious that the short space of time which has elapsed since the death of the President has hardly been sufficient to prepare a complete and thorough bacteriological report. This report contains all the observations which have been made up to this time.

On Sept. 11, during the life of the President, cultures were made by Dr. Wasdin from the base of the abdominal wound and from dressings removed at the same time. These were submitted to me for examination, and showed the presence of the ordinary pus organisms: Staphylococcus pyogenes aureus and S. cereus albus, with a gas-forming bacillus which, in pure anaerobic culture on glucose gelatin, forms small, nearly translucent colonies, with no liquefaction. In litmus milk it produces acid, but no coagulation. Morphologically, it is apparently a capsulated, short bacillus, which takes stains poorly, and which does not stain by Gram's method. Inoculated into the ear vein of a rabbit, which was killed immediately afterward, it produced, after 24 hours in the body of the rabbit, a marked accumulation of gas in the organs, and again grew out in pure culture. As yet the organism is not fully identified.

None of these cultures showed streptococci. A bacterium which appears to be one of the proteus group was, however, isolated, which does not stain by Gram, and appears in varying forms, sometimes small oval, and again quite rod-shaped and in short chains. Sometimes it is surrounded with a slimy covering, which remains clear like a capsule when the organism is stained. On slanting agar it produces a whitish, slimy growth, which gradually runs to the bottom of the slant and produces an odor of decomposition. On gelatin it grows slowly, with slight and slow indication of liquefaction. In litmus milk it produces acid and rapid coagulation.

At the time of the autopsy, Sept. 14, inoculations were made by myself. From the base of the wound there was again obtained a number of pus organisms, principally a white staphylococcus and the bacterium described above, but no streptococcus. Cultures made from the peritoneal surface of the intestines were entirely negative. Cultures made from the under surface of the omentum near the colon, were entirely negative, both with and without oxygen. Cultures from the blood of the right auricle were likewise negative. A very careful and extensive search for microorganisms in the contents of the necrotic cavity, behind the stomach, reveals nothing but a short, stumpy bacterial organism, which, as far as the work has been carried at present, appears to belong to the proteus group, and is very like proteus hominis capsulatus, described by Bordoni and Uffreduzzi.

Morphologically, it is not uniform, and sometimes appears almost encapsulated, being surrounded by material that does not stain; is quite refractory to Gram, and produces an odor of decomposition as it grows. It does not liquefy gelatin rapidly and grows slowly, as a glistening white elevated surface growth which slowly sinks, but on agar in the thermostat it grows very rapidly, as a moist, grayish-white translucent mass. Colonies on gelatin plates have a clear circumference, are granular and quite refractive. In litmus milk it produces acid and rapid coagulation. Animal experiments are still incomplete and cannot be published at this time.

It must be stated that there is occasion for suspecting that this may be a contamination, either from the outer wound or elsewhere, because, quite unavoidably, the technique of obtaining the material and cultures from the necrotic cavity was not absolutely correct. Cultures made from the small area of broken-down tissue under the chest wound at the time of the autopsy, grew what appears to be staphylococcus epidermidis albus, described by Dr. Welch.

The slimy, gray, necrotic material from the cavity above the transverse mesocolon behind the stomach was carefully examined microscopically, with the result that very few micro-organisms were found in the fresh state, and no recognizable tissue elements of any kind were found. The abundance of crystals which appeared more like fatty acid than fat crystals. It contained no free hydrochloric acid, and was alkaline in reaction. Experiments as to its digestive power were negative. About 2 cc. of this material was injected into the space behind the stomach of a dog (still living), with no results except quite an elevated temperature for 3 or 4 days. Other animal experiments are also still incomplete.

It might be well to state here that the bacteriological examination of the chambers and barrel of the weapon used, as well as the empty shells and cartridges, ordered by the district attorney, was entirely negative, except that from a loaded cartridge there was grown an ordinary staphylococcus and a mould. The chemical examination of the balance of the loaded cartridges, made by Dr. Hill, chemist, was also negative.

The absence of known pathogenic bacteria, particularly in the necrotic cavity, warrants the conclusion that bacterial infection was not a factor in the production of the conditions found at the autopsy.

ASSOCIATION OF ANEMIA WITH CHRONIC ENLARGEMENT OF THE SPLEEN.*

BY ARTHUR H. WENTWORTH, M.D., BOSTON.

(Continued from No. 16, p. 438.)

Fedo's share of the article refers to the etiology, pathological anatomy and pathogenesis. He says that it occurs usually in the first year of life, and that males are more often affected than females. He refers to 64 collected cases, of which 35 occurred between 1 and 11 months; 19 between 18 and 24 months; and 10 were several years old. Of this number 46 were males and 18 were females. He refers to the circumstance noted by Cardarelli that in a number of cases several children in the same family were affected. He admits that rickets has been observed to some extent in some cases, but believes that rickets, syphilis and bad hygienic surroundings only act as favoring elements to assist the specific organism that produces the disease.

Fede says "the only characteristic lesions are found in the spleen, liver and blood. The glands are normal or slightly enlarged. The liver is often enlarged from congestion and from a slight increase in connective tissue together with cloudy swelling. There may be fatty degeneration and atrophy of liver cells in some cases." *

* Read before the Massachusetts Medical Society, June 11, 1901, as a part of the general topic, "The Diseases of Nutrition of Infants."