A LARGE OX SPLEEN.

By FRANK CHAMBERS, M.R.C.V.S., G.V.O., Umtata, South Africa.

DURING the process of immunising cattle against East Coast fever we very often see large spleens in the cattle killed for vaccine purposes. The accompanying figure is from a photograph of the largest spleen that I have ever seen. It was taken from an ox that had been suffering from East Coast fever for two weeks. The

greatest length was 106·7 cm. (42 inches) and the breadth 34·22 cm. ($13\frac{1}{2}$ inches). Unfortunately as I was in the field I had no scales to weigh it with.

The large spleens met with in cattle killed whilst suffering from East Coast fever are said not to be due to that disease but to the redwater complications. In this particular case I could find no trace of the *piroplasma bigeminum*, and am inclined to attribute the size to the *theileria parva*.

A CONGENITAL DEFECT IN THE VENTRICULAR SEPTUM OF THE HEART OF A LAMB.

By A. LESLIE SHEATHER, B.Sc., M.R.C.V.S., Royal Veterinary College, London.

THE fact that this is the second case of the kind that has come under my notice during the last eighteen months (*see* Vol. XXIV. of this *Journal*, p. 132) would appear to indicate that the occurrence

of this abnormality in the domesticated animals is not so uncommon as might be gathered from the scanty references to it to be found in text-books.

The animal from which the specimen was obtained was a ewe lamb which appeared to be in perfect health up to the day upon which it died. No special symptoms were observed, the animal appearing a little dull and refusing its food. Death took place about four hours later, and the *post-mortem* examination was made at once, the following lesions being discovered.

A. Foramen ovale. B. Interventricular foramen.

There was marked enlargement of the liver, the organ being nearly twice the normal size. This enlargement was found on microscopic examination of sections to be due to very severe chronic venous congestion. In the alimentary canal there was evidence of very intense irritation. In the rumen there were two patches of livid congestion measuring about 3 inches in diameter, and there was similar congestion of parts of the small and large intestines, the cæcum being most extensively involved. In the fourth stomach there were large numbers of round worms (*strongylus contortus* and *strongylus cervicornis*).

The pleural cavity was found to be nearly full of turbid blood-

tinged liquid, but there was no evidence of either pleurisy or pneumonia.

There were about a couple of ounces of clear straw-coloured liquid in the pericardium.

The abnormalities found in the interior of the heart were the following: In the interauricular septum there was a persistent foramen orale of sufficiently large diameter to permit of the passage of a finger (*see* fig., A). In the natural state this foramen did not maintain the patent condition shown in the photograph, but it was dilated by means of a piece of stout glass rod during the process of preservation for museum purposes.

The position of the foramen in the interventricular septum corresponded exactly with that found in the previous case (*see* fig., B). The opening was elliptical in shape, the long diameter being placed transversely, and measured $1\frac{1}{2}$ by $\frac{1}{2}$ cm. The opening was situated immediately below the orifice of the aorta in the left ventricle. This foramen was quite patent in the natural condition and formed a free communication between the ventricles.

In view of the other lesions found, it appears to be probable that the abnormalities in the heart were not the immediate cause of death, but the advanced chronic congestion of the liver indicated that there was marked obstruction to the circulation.

Reviews.

A Guide to the Dissection of the Dog. By O. Charnock Bradley, M.D., D.Sc., F.R.S.E., M.R.C.V.S., Principal of the Royal (Dick) Veterinary College, Edinburgh, Lecturer on Comparative Anatomy, University of Edinburgh. London: Longmans, Green & Co., 1912. Price, 10/6 net.

ONE of the advantages of human medicine as compared with the sister science is that those who practise it require an intimate knowledge of the anatomy of one species only—the human. Veterinary practitioners, on the other hand, have to treat the diseases of several different species of animals, and a study of the anatomy of these species must therefore form part of the veterinary student's education.

But the brevity of human life, and the limited capacity of the human brain for learning, make it unreasonable to demand that veterinary students should be required to give evidence that they are as intimately acquainted with the anatomy of the horse, ox, sheep, pig, and dog (to mention only the most important of the veterinary surgeon's patients) as the student of human medicine has to be with the anatomy of man. In recognition of this fact the veterinary student has always been expected to acquire what may be called a full knowledge of the anatomy of the horse only, his study of the anatomy of the other species of domesticated animals being almost confined to the skeleton and the important viscera. In all probability that arrangement will continue, because the horse is likely to remain the most important veterinary patient. Nevertheless, the anatomy of the dog deserves more attention than it has hitherto generally received in veterinary dissecting-rooms. In consequence of its smaller size, the body of the dog can be much more