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Diagnostic Problem

John Wallwork

Abstract

SUBJECT: Female, age 51.

HISTORY: Pain for nine months of a sharp, gripping nature lasting a few seconds at a time and occurring several times per day. No relation to meals, etc.

ON EXAMINATION

A large mass in the right inguinal fossa was noticed by her General Practitioner on the evening of admission. Some tenderness and guarding was present. Patient was afebrile.

P.V.: Pelvis empty but lower pole of mass palpable high up on right side the mass having a soft consistency.

B.S.: Present.

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impediment to the use of mutagens for improvement. Even in agricultural or ornamental plants, "mutation breeding" is being used quite extensively, especially in inbred strains whose genetic purity one does not wish to destroy by the introduction of desirable genes through crossing. In these cases, too, the loss of, perhaps, a thousand undesirable mutants for the sake of one desirable one may be worth while. For agricultural animals and, even more, for man improvement by induced

mutation is out of the question unless treatments can be found which quite specifically produce certain types of mutation. The hope for this to happen is exceedingly slight, at least until the time when we can implant into embryos genes that have been extracted from selected donors or have even been tailor-made in the test-tube. Although this is a distinct possibility for the future, I do not think that it will materialize in mine or even in your lifetime.

DIAGNOSTIC PROBLEM

SET BY JOHN WALLWORK

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PREVIOUS HISTORY

Duodenal Ulcer diagnosed several years earlier and treated medically with success.

Barium meal and follow through two weeks before admission showed no abnormality.

INVESTIGATION

Erect abdominal X-ray showed opaque area in right iliac fossa with a few scattered fluid levels in the large bowel.

- A. What is the mass in the right iliac fossa?
- B. What is the likely cause of the symptoms and signs described?

(Answer on Page 22)

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