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## Diagnostic Problem

**Sandy Davison**  
**M.B., Ch.B., B.Sc.**

### Abstract

Subject: A.L., 40, male.

Presentation:

1. abdominal distension for a week prior to admission
2. vague peri-umbilical pain: constant, radiating to back and groins, not relieved by antacids or warmth
3. nausea and vomiting of coffee-grounds material, followed by bright red blood, on evening prior to admission

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# DIAGNOSTIC PROBLEM

Set by SANDY DAVISON, M.B., Ch.B., B.Sc.

(answer on page 37)

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## Enquiry:

P.H. "hepatitis" two years previously  
F.H. father d. C.V.A.; mother d. pneumonia; brother d. alcoholism  
S.H. 20 cigarettes/day; previous treatment for alcoholism  
Systematic: occasionally jaundiced; otherwise N.A.D.

## Examination:

Jaundiced; spidery naevi on face and shoulders; no lymphadenopathy; smelling of alcohol

C.V.S. pulse 80, B.P. 120/80; heart N.A.D.  
A.S. abdomen distended; peri-umbilical and bilateral loin bruising; fluid thrill; shifting dullness present; liver palpable 3 fingers below costal margin; tip of spleen palpable; no tenderness; F.O.B. positive.

R.S. dull at both bases.

1. What is the differential diagnosis?
2. What investigations would help in determining the diagnosis?

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