

presence *always* a precursor of the disease we all so much dread? As I said before, time will probably reveal to us the true facts in reference to the pathogenic microbe which has lately kept the medical lights of Europe on the rack, the effect of which will be, no doubt, to make us all think that rather much faith has been placed in the etiology of all disease being due to a specific microbe, regardless of other factors.

Clinical Notes.

Foreign Bodies in Intestine Simulating Gall Stones.*

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Was called in urgent haste to see Mrs. D——, aged 46. About an hour previous to my visit she had a severe chill, accompanied by vomiting of tenacious mucus, tinged with bile. A few minutes after the vomiting a violent pain seized her in the right portion of the epigastrium.

When I arrived I found her writhing with agony, and throwing herself from one side of the bed to the other; the surface was cold and covered with a clammy sweat. She complained of severe pain radiating through the shoulders and back, but the situation of the greatest pain was in the region of the gall bladder, which was also exquisitely tender.

After the hypodermic administration of morphia and atropine, and the application of hot fomentations the pain entirely ceased, and as the patient was now feeling fairly well I left, first instructing the nurse to search the stools carefully for a gall stone. When I visited the patient the following morning I found her deeply jaundiced; there was extreme tenderness extending from the lower margin of the liver to the umbilicus, temperature 102°. As there was now no vomiting I administered opium freely, and ordered the hot fomentations to be continued. Under this treatment she continued to improve, and in two or three days was apparently well. I now prescribed phosphate of soda, and ordered the inspection of the stools to be continued. In one week from the date of my last visit I was hurriedly summoned in the night, and found the patient in precisely the same

* Read at the Toronto Medical Society.