

upon. And I hoped for the opportunity to remove the appendix in a period of quiescence. It was the same old story—trivial constitutional disturbance, low white count (11,000), but marked local tenderness with distention. The operation showed an inflamed and thickened appendix, with odorless pus. I dare say that this patient will do well, and that the delay of a night in so mild a case has made no difference. Nevertheless, prognosis was at fault.\*

Now, in this very recent case, an accurate *prognosis* was the one indispensable deduction to be desired. The physician's diagnosis was accurate; but his favorable prognosis was a matter rather of hope than of expectation. The wish was father to the thought, as indeed was my own in waiting over night. The *real* reason for delay lies in the hope that things are not so bad as they seem.

The same natural hope is seen to-day in the objections which many have to the removal of gallstones that are but slightly offending. The chief support of these objections lies in the reports of the autopsy-table, where have been found so many gallstones which have never given a sign. But the surgeon is impressed by the evils of gallstones in advanced cases, and the higher mortality in such cases is owing to delay. I am impressed, besides, in family histories, by the frequency of deaths from gallstones, when I enquire specifically for the cause of death in each member of the immediate family.

As a matter of fact, we know the prognosis of every pathological lesion, and we know it well enough to say what the chances are. We know that it is either certain or uncertain. The prognosis of cancer of the stomach is certainly bad; that of gallstones certainly doubtful. Prognosis is good, bad, or doubtful, according to many and varied circumstances, as we all know. Do we know diagnosis well enough? Are the uncertainties of diagnosis and those of prognosis enough for a wise decision as to "time and judgment"? Is not this a topic that it is well to dilate upon in connection with the disease claimed as theirs by both physician and surgeon?

We pay little attention to prognosis, and yet prognosis is what decides everything, even the assignment of the case; for prognosis means, does it not, the course a disease will follow

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\*This patient made a good recovery