

creasing; is very deaf and stupid looking. The family, a large one, having generally a scrofulous appearance.

On placing the boy on his back, I found him unable to extend his legs, the whole abdomen being tense and brawny with protrusions, and slight redness of the umbilicus, but no feeling of fluctuation; no difficulty in breathing, but it hurt him to cough; pulse weak, quickened and compressible, not wiry; tongue slightly coated and headache.

There was no history of a blow or other injury to the abdomen, but from the evident scrofulous condition I judged it to be a case of idiopathic abdominal abscess. I directed a large linseed meal poultice to be applied over the whole abdomen. To have nourishing diet, cod liver oil, and syr. ferri iod. A dose of ol. ricini to be given immediately, this latter moved him on the following day.

26th—Four days after, the abscess had burst at the umbilicus, the pus being thin and extremely fetid; abdomen less tense, but still much pain.

28th—Discharge was altered in character, semi-fluid; of a yellowish tinge and very fetid, showing that the intestine was perforated; at each inspiration this substance exuded. As the parts were still inflamed, the poultice was continued.

29th—The umbilical opening larger, and intestinal contents freely passing outwards. Emaciation increased, a slight hectic cough; tongue clean and moist. The bowels not having moved since the 23rd, ordered ol. ricini.

30th—Inflammatory condition of umbilical opening being removed, and seemingly but little purulent matter exuding with intestinal contents, the poultice was removed, an oiled pad applied to opening, and an abdominal bandage drawn tight, to prevent if possible the passage of the intestinal contents, but this completely failed to accomplish that object. The ol. ricini not having operated "per anum" but escaping at the opening, I directed them to give an injection.

February 2nd—He appeared brighter in countenance than I had at any time before seen him; tongue clean; pulse weaker, but emaciation greater, takes considerable food, but refuses the cod liver oil. Umbilical discharge more feculant, very offensive, and when he gave a slight cough spurted upwards from the opening for over two feet, it was ichorous in character, as the skin was slightly excoriated where it had been in contact. The enema his father told me had not brought anything away, it was ordered to be re-administered.

3rd—Great emaciation, pulse weak and small, dry hectic cough,