tion must be sought for through the vascular system. Without exaggeration, the great omentum may be regarded as a mechanism for supporting and keeping in position a rich arborization of delicate vessels separated by as slight a cell-layer as possible from the peritoncal cavity. As might be expected, with the branching of the main vessels, the finest and most delicate vessels are largely collected toward the periphery and along the free border of the omentum. Here it is, therefore, that the most prompt reaction is liable to occur.

It is from this point, then, that we must start if we are to appreciate the part played by the omentum in the economy. I have already hinted that it is from the abundant network of delicate vessels that there may be abundant flow of fluid into the abdominal cavity. Similarly the rich system of contained lymph-spaces and lymphatic vessels, and, indeed, of blood-capillaries, may be the means of rapid absorption of fluid from the same eavity.

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Much as I should like this evening to enter into the more physiological aspects of the omental functions, I must desist; for my personal observations along the lines just indicated are not as yet complete or in a proper state for bringing before you.8 What I wish to bring before you to-night is the evidence we possess concerning the activity of these omental vessels in conditions which are constantly being brought before our eyes, but which, it is worth noting, would appear not to have been thought worth noting. I refer to their reaction in localized inflammations of the abdominal cavity,

<sup>\*</sup> Durham (loc. cit.) records some most interesting observations upon the part played by the leukocytes in relation to the surface of the great omentum, but he does not indicate with full satisfaction the extent of passage of fluid, leukocytes, or foreign particles into or out of the viscus. Similarly, Adler and Meltzer (Journal of Experimental Medicine, i, 1896, p. 482) discuss very fully many important points in connection with the absorption of fluid from the peritoneal cavity, but their observations stop short of determining the exact regions of passage of fluid into the lymph-spaces of the peritoneal walls.