

GUNSHOT WOUNDS OF THE ABDOMEN.

Dr. E. P. Frantske, writing in the *Ronosky Vrach*, says: In the First Warsaw Red Cross Hospital were admitted 5,200 wounded, and only fifty-nine had suffered penetrating wounds of the abdomen. The small percentage is remarkable, yet, as the author points out, this probably does not represent the exact ratio, since many cases of abdominal injuries prove fatal on the battlefield, while many others are treated in the field hospitals. Of the fifty-nine abdominal wounds observed by the author, thirty-one were subjected to operation, with laparotomy in eighteen cases. Most of the injured already suffered from a well-developed peritonitis, eight having died a few hours after admission. Of the total number, twenty-six, or about forty-four per cent, died, all from peritonitis, with the exception of one. Most of the fatal cases resulted from injury to the small intestines, next the bladder, liver, kidneys, and finally the colon. It was observed that an operation performed during the acute stage of peritonitis almost invariably proved fatal, and that waiting until the acute symptoms subsided was better surgery. The expectant treatment consisted of absolute rest, strict diet, administration of morphine or opium, ice or hot compresses to the abdomen, and saline infusions. In generalized peritonitis hot air proved more efficacious than any other form of heat. The author argues against conveying those injured in the abdomen to distant hospitals, as it increases shock and occasions delay.—*N. Y. Med. Jour.*

TYPHOID FEVER IN CHILDREN.

K. G. Percy (*Boston Med. and Surg. Jour.*) analyzes 308 cases of typhoid fever which have been treated in the Children's Hospital of Boston since 1913. This series embraces children from infancy through the twelfth year. The author comes to the following conclusions: Typhoid is a relatively common disease in childhood and far more prevalent in infancy than formerly supposed. Symptomatically it is ushered in very much as in adults, with headaches, fever, malaise, and abdominal pain as the most frequent symptoms. In this series and in a large collected series from the literature, the spleen is enlarged in 71 per cent. of all cases, rose spots are seen in 61 per cent., positive Widal's are seen relatively early in 88.2 per cent., white blood count is below 10,000 in 73 per cent. The fever lasts an average of twenty-five days. Relapses occur in 11.8 per cent., intestinal hemorrhages in 4.2 per cent., perforation of intestines in 1.2 per cent., complications in 10.6 per cent., and the mortality is 5.3 per cent. Therapeutically, a diet, bland, high