

accompanied by chills and vomiting. She recovered from this and remained well until November 8th, 1897, when she had another attack. She had a third attack on the 13th of November, and was sent into the Royal Victoria Hospital. She also had similar attacks on the 20th and 23rd of November, and was operated upon (cholecystostomy) on December 2nd, 1897. Seven faceted stones were removed from the base of the gall-bladder, the sac also containing some bile. This sac was found to be completely closed off from the remainder of the gall-bladder, which also contained 6 faceted stones. An incision was made lower down in the gall-bladder, through which these stones were removed, and the incision was closed by suture. A communication was then made through the occlusion, and a drainage tube inserted down to the cystic duct.

This patient's progress since operation has been quite satisfactory.

It will be noted that all these patients were women, who were, with one exception, the mothers of families, and that their ages varied from 23 to 61 years. There were two cases of solitary stone; the others were all multiple.

*The operations were:* Simple cholecystostomy, 5; cholecystostomy with incision (and suture) of the cystic duct for the removal of a group of impacted stones, 1; incision (and suture) of the common duct for the removal of a solitary impacted stone, 1; incision (and suture) of the common duct for the extraction of a movable faceted stone, and incision of the shrunken gall-bladder in the same patient for the removal of six other similar stones, 1; and in the tenth case the discovery that the stone (or stones) had already passed through the ducts.

*Results.*—With the exception of the typhoid patient, all recovered, and in no case was there at any time a symptom to cause anxiety. One patient had, at the end of three months, a biliary fistula, another had a sinus persisting, six are completely healed and one was operated upon only eight days ago.

Case VII. is another case in evidence of the frequency of cholecystitis as a sequel to or complication of typhoid fever, and emphasizes the fact that bile, so far from being destructive to the typhoid bacillus, is, actually, an excellent medium for its growth and reproduction. In all the cases the operation was completed at a single sitting.