

removal of gallstones are robbed of their terrors and patients who formerly would have died can now be carried safely through.

Owing to the introduction of this method of drainage it is no longer necessary to break up calculi by the needling process, or to open the intestine for the purpose of removing a stone from the common duct, and why? Because we no longer are afraid to make a direct incision over the stone into even the most friable duct. Then if necessary, we can readily break up the stone by means of gallstone forceps passed through the opening.

#### CHOLECYSTOSTOMY.

Gallstones are found most frequently in the gall bladder. They are sometimes formed with great rapidity. Among my collection I have several thousand taken from the gall bladder of one patient.

CASE 1.—In February, 1897, he had his first attack. Cholecystostomy was performed, a fistulous opening remained, and this was closed by two sutures. In November, 1897, he again had colic and jaundice; in March, 1898, Dr. Tiffany of Baltimore operated on him. He found no stones. In June, 1898, he was still in the hospital suffering from attacks of colic and transient jaundice. The gall bladder was again opened, but no stones were found. July 3, he suffered from a blow on the head for which a portion of the skull was elevated. In August, 1899, his colicky pains returned. October 1, he had colic for four days and was then jaundiced for two months. In November, he was operated on again, for the fourth time, a black tarry fluid and one gallstone, soft and black and of the size of a cherry pit, were found in the gall bladder. A cholecystenterostomy was then performed and anastomosis with the colon completed. At last reports the button had not passed. The subsequent progress of the case is unknown to me. The gallstones in this case were like grains of gunpowder, and it was not to be expected that operative procedures would give much relief.

But this is an exceptional case, and it is a well-known fact that a simple cholecystostomy in a large majority of cases gives complete relief, the larger the stone, or stones, the greater the freedom from recurrences; the smaller the stones, the greater the liability for recurrences.

#### GANGRENE OF THE GALL BLADDER.

While it is a well-known fact that gallstones may lie in the gall bladder for years without giving rise to trouble, it is also well known that they will frequently produce a condition of inflammation of the gall bladder that may even suddenly eventuate in gangrene. I have met two cases of gangrene of the gall bladder.