

TABLE A.

Patients who complained of Imperfect Relief after the Removal of the Appendix in the Quiescent Period.

	No. of Cases.
Appendix imperfectly removed... ..	2
Ovarian trouble coexisting... ..	9
Persisting or relapsing colitis... ..	8
Persisting local pain..... ..	7
Neurasthenia or hypochondriasis..... ..	5
Continued attacks due to gall stones... ..	3
"    "    colic... ..	2
"    "    movable kidney... ..	2
"    "    stone in kidney... ..	1
"    "    an unexplained cause..... ..	1
Tender mass in the right iliac fossa..... ..	5
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	45

The 45 cases of which I have notes represent patients who came complaining that "they were no better for the operation," or that they were nearly as bad as, or perhaps even worse than, they were before." They also include examples in which "attacks" have continued unabated after the removal of the appendix.

As will be seen from the following summary, the degree of failure claimed to be manifest varies greatly.

A man of 50 from South America consulted me for persisting sinuses in the right iliac region with continued pain and discomfort in that part. The trouble had followed upon a large perityphlitic abscess which had been opened five years previously. The sinuses had been dealt with and counter openings made, but without benefit. Finally the abdomen had been opened and the appendix removed. A well-healed scar in the usual situation indicated the site of this operation. Still no improvement followed. Thinking that a loose concretion may have been overlooked I reopened the abdomen. Buried among many adhesions I came upon an undisturbed but diseased appendix, which I removed. In seven months all the sinuses were healed. I have no explanation to offer for this case, beyond recalling the fact that the statements of patients, even when given emphatically and in perfect faith, are not always to be relied upon.

A second case of this kind was in the person of a youth of 20. His appendix had been removed by an eminent surgeon, during the quies-