

Many of the patients, of course, were admitted moribund, or had fractured pelvis or spine. Apart from operation, death usually ensued within twenty-four hours; one patient lived ten days.

The best results were obtained by early operation, which means within twelve hours. All the Bristol successes were treated from four to six hours after injury; of the London cases, 13 out of 33 operated on within twelve hours recovered, but only 1 after the lapse of twenty-four hours.

As regards site of the injury, duodenal tears were almost invariably fatal.

It will be observed that, even apart from operation, 4 cases recovered in which abscesses or obstruction, developing subsequently, showed that rupture had occurred. One patient got well without operation who was thought too ill to have anything done!

After successful suture, the great majority of the cases seem to remain quite well. Of the Bristol cases, 3 were examined long afterwards, and had no trouble except a slight incisional hernia in 1 case; 2 of these were seen by the writer six and eight years after the operation. A few of the London cases returned for obstruction or abscesses.

*Ruptured Liver.*—Recent data concerning this injury are not easy to obtain. The writer has abstracted the records of 10 cases treated at the Bristol Royal Infirmary, of whom 6 were operated on and 2 recovered. One of the latter had a small tear, and was not diagnosed for two days. The other recovery was operated on after five hours.

Adding together the statistics during ten years in the Bristol series, and five years at St. Thomas's and the Middlesex Hospitals, one obtains a record of 18 cases operated on, of which 12 died and 6 recovered.

Tilton reports the figures from ten New York hospitals during 1895 to 1905, whereof 7 out of 12 died and 5 recovered.

*Ruptured Spleen.*—This injury is less common than the above. The dangerous tendency to produce no alarming symptoms for several hours has already been mentioned.

Laspeyres has found in the literature 58 cases of splenectomy for rupture, of which 39, or 67·2 per cent, recovered; but such records are likely to be far too favourable, as deaths are less written up than successes.

Putting together the figures for the Bristol Royal Infirmary and St. Thomas's and the Middlesex hospitals, one finds 15 cases with 9 deaths and 6 recoveries.

*Ruptured Pancreas.*—This appears to be a rare injury: two large London hospitals had no case in five years. At the Bristol Royal Infirmary there have been 2 recent cases; 1 died, the other recovered, and was well four years later. The fatal case furnishes an instance of a common sequel, namely, severe self-digestion of the tissues leading to sulphuremic abscess. Mikulicz in 1903 collected from the literature 24 cases, of which 13 died without operation, and of the 11 operated on 7 were cured.

Pancreatic cyst has followed injury of this gland.