

Lane in the origin of the bands and kinks which take such an important part in the production of stasis in the intestine. I may say that this theory of the sequence of disturbances has not been confirmed, and we are still in the dark with regard to the origin of Jackson's membrane, and the various kinks which are sometimes observed in intestinal stasis.

Cæcal stasis is said to exist when there is considerable residue of barium in the cæcum seventeen hours after the ingestion of a barium meal. In the skiagrams of many cases of ileo-stasis a remarkable feature is that, although there is stasis in the small gut, the barium is propelled along the colon with normal or excessive rapidity. If, therefore, cæcal stasis is the common cause of ileo-stasis, the development of the obstruction in the small gut must cure the cæcal stasis. The only cases of ileo-stasis which are frequently associated with cæcal stasis are those which occur in patients with abdominal viscera markedly displaced downward or with an old-standing mucous colitis. Cæcal stasis unaccompanied by ileo-stasis is a common finding in spasm or organic obstruction of the rectum or of the colon distal to the cæcum. It is also not an uncommon finding in splanchnoptosis. Cæcal stasis probably always tends to produce ileo-stasis and to increase the severity of it due to other causes. It should, therefore, be looked upon as a contributory factor in the production of gastric symptoms of ileo-stasis. As a disorder by itself it may, by causing auto-infection or general infection, give rise to symptoms referred to the stomach.

*Spasm of the Ileo-cæcal valve as a Cause of Ileo-stasis.*—Spasm of the pylorus is quite different from that of the ileo-cæcal valve as the former is regulated by the reactions of the gastric and intestinal juices. An acid reaction in the duodenum closes the pylorus, whilst an acid reaction of the stomach and neutral reaction of the duodenum tends to open the outlet. The ileo-cæcal valve is closed principally by an increase of the intracæcal pressure and spasm of the valve may be said to exist when there is spasm of the cæcum. Now, in acute appendicitis, Mr. Fenner, of the Toronto General Hospital, informs me that radiographical examinations frequently show gastric hypertonus and barium in the stomach seven or eight hours after the meal is ingested, along with barium in the lower end of the ileum, but without any barium in the cæcum. This indicates that the causes of gastric stasis and ileo-stasis were spasm of the pylorus and ileo-cæcal valve respectively. The symptoms referred to the stomach in acute appendicitis are generally what one would expect to find in