

in conditions of the patient which are much more unfavourable for operation. Nevertheless, the mortality rate is low, and the results in the successful cases are brilliant. I have purposely refrained from using in the title of this communication the uncouth and cumbrous terms by which these operations are described, (choledochotomy, choledocholithotomy, choledochoduodenotomy, choledochoduodenolithotomy, etc.), as no one of them could be properly used for all of the six cases which form the subject matter of the paper. Of these six cases five were females, each of whom had borne a large number of children. The ages of the patients ranged from 33 to 61 years. In two there was but a solitary stone, in three there were stones in the gall-bladder, as well as in the common duct, in four, there was obliteration of the cystic duct and a contracted gall-bladder, which contained no bile, and in two, a large stone was impacted in the ampulla of the duct within the duodenum, (diverticulum of Vater), and was removed through an incision in the duodenum (choledochoduodenotomy). There was but one death in the six cases, from pneumonia on the sixth day after operation, and one patient was submitted to a second operation upon the duct, five and one-half months after the first operation.

CASE I.—E. B., a gentleman, *æt.* 52, had his first attack of pain in the right side of the abdomen while travelling by rail in the summer of 1892. It was severe, lasted all evening and was followed by jaundice, which passed off in a day or two. Three similar attacks followed, one in three months, another in the winter of 1893, and the third in February, 1894, with intervals of good health. On the 25th of January, 1895, the fifth attack began, more insidiously than any of the previous ones. From this time there were frequent attacks with persistent and steadily increasing jaundice, drowsiness, anorexia, itching of the skin, and loss of weight, from 225 lbs. to 140 lbs. in eleven months and a half,—(from January 25th, 1895, till he came under my observation, January, 13th, 1896). Operation was performed on the 14th of January, 1896. There was much adhesion of the colon, duodenum and omentum to the liver. The gall-bladder was contracted and empty. A stone, about the size of a playing marble, was discovered impacted in the ampulla of the duct, within the duodenum. It was removed through an incision made along the line of the duct and obliquely across the duodenum at its posterior border—choledochoduodenotomy. The wound in the duodenum was closed by fine silk sutures, two or three carried through all the coats of the bowel, and then a double row of Lembert sutures. A rubber drainage tube was carried down to the bottom of the cavity and surrounded by iodoform gauze packing. There was no escape of bile or duodenal contents,