

of gallstones, with obstruction to the flow of bile, to make sure that the common duct is cleared, and more particularly its terminal portion. And in the case of obstruction in the duodenal portion of the duct, as well as the retro-duodenal part, the stone can best be removed in many cases by the duodenal route.

McBurney's conclusion in his paper in 1898 would still seem timely, for the prejudice against the duodenal route still exists in certain quarters. He says: "My experience would lead me to prefer this plan for the removal of a calculus situated at almost any point from the termination of the cystic duct to the point of entrance of the common duct into the duodenum. I have found the crifice of the duct easily dilatable, and it may be freely incised for at least half an inch with perfect safety."

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