

tumor grew smaller, but did not disappear entirely. The patient began to cough a great deal; the expectoration consisted of a dark purulent sputum with mucoid material with a very offensive odor. Toward the end of June he felt a soreness below the right scapula; this was followed by a tumor in this region. There was no dyspnoea. The appetite was fairly good, and the pulse regular. On June 29, he had the appearance of a man in the last stages of tuberculosis. The emaciation was extreme. It was with great difficulty that he was able to stand or walk. The swelling was soft and fluctuating. Examination of the chest gave negative results, except around this lump, where there was absence of the respiratory sounds. The abdomen was flat. On the right side, there was a moderate-sized mass, quite hard, flat on light percussion, and slightly resonant on firm percussion. The mass did not move with respiration. Pulse 110, respiration 22. Urine normal. Appendiceal abscess was diagnosed, which had perforated the bronchus, and also the eighth intercostal space. The abscess in the back was opened, and two or three ounces of stinking pus was discharged. This caused him considerable relief. Operation was advised. The mass was found to be adherent to the anterior abdominal wall. Communication was found existing between the abdominal and thoracic cavities, water passing through and emerging from the sinus in the chest wall. Patient did well for about a week, when collapse supervened.

Dr. Graham asked if the abscess had passed in front or behind the liver.

Dr. Hastings asked if this case did not prove that it was wise to operate on all cases of appendicitis, especially after the second attack.

Dr. McPhedran thought not. He believed many of the cases, even after several attacks, became quite well. The abscess passed in front of the liver.

Mr. Cameron said the case was interesting to him, as it was the third he had met inside of the year. In twenty years he had not met such a case before. He had a patient under his care lately who had seven or eight attacks of appendicitis of the catarrhal variety. It was thought prudent to remove the appendix. The appendix, on removal, was found to be quite healthy, with the exception of some slight infiltration of the muscularis mucosæ. There were no adhesions.