

into the ward for a few days, to be closely watched by the nurses, and they confirmed her statement, It is difficult at first sight to understand how this occurs, the two openings being so completely apart; but I have noticed the same thing in one or two cancerous cases, and this is, in fact, the only drawback to the operation, and fortunately it is by no means constant.

The cases of stricture are the most formidable when the disease gives rise to complete obstruction. Now, obstruction may be acute or chronic. Acute is caused by some twist or band in the small intestine; but it is in chronic obstruction that colotomy is called for, because it is most frequently due to cancer of the sigmoid flexure. It is important, when called in to a case of this kind, to diagnose the state of affairs at once and the great thing is to ascertain if there has been a gradual, increasing difficulty of defæcation. That is sometimes not easily made out, especially in women; but, if you question closely, you will generally find that there really has been gradually increasing difficulty. Do not think that fæces "like tobacco-pipe" are absolutely necessary evidence of the state of the bowel. A very frequent condition is that of constant diarrhœa, in which small lumpy motions, with more or less liquid, are passed; therefore, the calibre of the motion affords no certain indication of stricture. From what I have said, you will have perceived that, in cases of chronic obstruction, the disease is most likely to be situated about the rectum; and it is often possible for you to feel it on examination with the finger and in females you have the advantage of examining by the vagina. I find that, by using the fore and middle fingers, I can reach higher up the bowel than with the fore-finger alone, for then the middle finger is apt to be in the way. With two fingers, also, you can sometimes draw down the mucous membrane, and so reach a little higher. Still, the evidence thus obtained is often negative. Then the next best method is to pass a tube up into the bowel. A tube such as is attached to a stomach-pump is the most useful; but it is dangerous if not carefully used, for you may do harm by pushing it through a softened part of the bowel. If it be oiled previously, it may