

11th.—Still improving; morning temperature 99° ; evening $99\ 3.5^{\circ}$.

12th.—Morning 98° ; evening $98\ 4.5^{\circ}$.

Recovery steady from this time. The tenderness kept up for about a week later, gradually fading away.

Patient remained in good health until 25th July, when she was seized with sudden pain in right iliac region. This time she had no chill. No vomiting. Is constipated. Temperature 103° in evening. Pulse 130, small and tense. Tongue furred. Vomited once while I was in. This is the only time she has vomited. Decided tenderness in region of appendix. Maximum intensity corresponding to McBurney's point. She was placed on light fluid diet, rest in bed. Ice bag to right iliac region morning and evening, enema of warm water and morphia sufficient to subdue pain.

24th.—Temperature 100° . Pulse 99, full and soft. Abdomen still tender.

25th.—Temperature 98° , and markedly improved.

Tenderness rapidly diminished, and on 28th she was moving about quietly.

This second attack I concluded to be a recurrent appendicitis and a confirmation of diagnosis in the former case. I should like to hear further opinion on the case from any of you who are more conversant with this subject of appendicitis in its many and varied phases.

The second case I shall make mention of was that of Mrs. C., age 33, married, and has family of five children. Left Ontario to join her husband, north of this place, and arrived in Calgary on 13th April last.

On the morning of 12th April, she was seized while on the train with violent vomiting, severe pain in abdomen and diarrhoea. Had no chill. These symptoms she attributed to eating too many pickles for breakfast. Reaching Calgary on the 13th, she was directed to my office. The vomiting had ceased, but there was still a little diarrhoea. Marked tenderness in right iliac fossa, with a point most exquisitely sensitive about $2\frac{1}{2}$ inches from anterior superior iliac spine and somewhat