servation in hospital there were no signs or symptoms pointing to perityphlitis.

Autopsy (performed Oct. 22nd, 1890, 36 hours after death). -Muluple condensing osteitis of tibiæ and cranium. Extensive amyloid degeneration of kidneys. In abdomen a large irregu lar fibrous mass about the head of the cæcum. The vermiform appendix lies just below the brim of the pelvis on the right side. and is embedded in dense fibrous tissue. The mass of fibrous exudation so formed is as large as an apple, and is intimately adherent with the upper end of the rectum and lower part of the sigmoid flexure, at a point opposite the second sacral vertebra, on the right side. The rectum appears to descend into the pelvis on the right side. On slitting up the intestine, the ileum, cæcum and ascending colon are found to be normal. The appendix vermiformis is twisted and constricted in many places by the adhesions formed about it. The bowel is much narrowed at this point. The base of the ulcer is formed by the fibrous mass above referred to, and a ragged sinus extends about two inches into it. No signs of suppuration exist. Another similar but smaller ulcer is situated near the splenic flexure of the colon and has formed adhesions with the anterior abdominal wall. The portion of intestine between the two ulcers shows slate-like pigmentation and is dilated, containing soft dark gray fæces.

The condition present was obviously one of severe syphilitic ulceration of the intestines. The extensive chronic adhesive perityphlitis was probably of very old standing and had become latent before the patient came under observation here. In looking up the literature of the subject I have been unable to find any exactly similar case reported. In most cases where the condition has not been due to appendicitis, it was secondary to some ulcerative or cancerous condition about the execum, or in connection with some form of intestinal obstruction. Here, the primary cause was situated in a portion of the bowel not normally in very close connection with the execum or appendix. The reason appears to have been the right-sided position of the rectum, an anomaly found in five or ten per cent. of all bodies examined, bringing the upper part of the rectum close to the right iliae