

THE CASE OF THE KING IN THE LIGHT OF HIS PREVIOUS MEDICAL HISTORY.

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Perityphlitis or, as it is known here, appendicitis, can be divided in its results into 3 classes: (1) Those where the operation is done within 36 hours (which is the period of election), after the inception of the disease, where the mortality is under 3 per cent.; (2) where done from that time to the fifth day where the mortality is from 4 per cent. to 15 per cent., and the most critical judgment has to be exercised by the surgeon in respect to the time of operation; and (3) those operated on after the period named, when the disease often limits itself to a circumscribed abscess, where the mortality after operation again markedly diminishes.

In the present instance which occupies the attention of the whole world there is a factor that has not been alluded to. In an ordinary case after the existence of the disease of a week or thereabouts, with the formation of an abscess, there would be a very favorable prognosis as above detailed, but it is well known in the inner medical circles in London that King Edward has been the subject for several years past of diabetes. It was this complication that decided, some time ago, when he sustained a fracture of the patella, the abstention from an operative treatment, and that it was advisable to resort to the old method of immobilization of the limb, with its risks of imperfect union, rather than to take the chances of the modern and better method of suturing the broken ends of the bone together after an incision.—Abstract *New York Medical Journal*, Written, June 26th.

THE OPERATION MASTERLY IN ITS SIMPLICITY AND CORRECTNESS.

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It sounds strange to the ears of American surgeons to have the cable send back the word "perityphlitis" in describing the grave illness and momentous struggle of King Edward. It is like an echo of the early studies and battles that were waged in New York twenty years ago, when that inadequate and unsatisfactory word was displaced by "appendicitis."