

# A FEW REMARKS ON APPENDICITIS WITH CASE REPORTS.

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I WOULD like to record my appreciation of the honour I feel in being here to-night, and having this opportunity of meeting and speaking to the members of this Branch of the British Medical Association. I had looked upon this occasion as a part programme of a few days vacation planned for myself a short time ago. As a member of the Association, I feel like applauding the masterly perseverance of the Branch's Secretary, Dr. Watson, in arousing to some sense of their duty, members, who like myself, live outside Halifax. It is hard to refuse Dr. Watson when he makes a request. I soon found myself promising that, if I went to Halifax as I intended doing some time in January, I would make an effort to furnish some quota to the work of the Branch, which, if it had no better value, would at least show that I wish to be known as a living unit of this grand old Association. After much worry and perturbation of spirit, I decided to comment briefly on a disease which, more than any other surgical ailment, has been thrown in my way during my six years of practice. I refer to appendicitis. I do not presume to think that in discussing this somewhat well-worn theme I shall tell you anything new, but the great importance of the subject, the oft-times insidious character of the disease with its direful results if we fail to do the proper thing at the proper time, should always stamp it as a subject for our best thought, and should invite contributions from all sources that have

given it even a moderate degree of consideration, or brought to it from actual observations in practice even a comparatively limited experience.

*Pathological and Anatomical Considerations:*—Everyone is now agreed that appendicitis is due to the action of septic organisms from the inside, acting first upon the mucous coat and setting up inflammatory changes that, even in a short time, may extend through the appendiceal wall to the peritoneum, causing a local or general peritonitis. The elements essential to an attack of appendicitis are septic organisms and a lowered vital resistance of the appendix. The former is ever present in the appendix and intestine; the latter may be induced by anatomical irregularities of the organ or its mesentery, old adhesions, foreign bodies, faecal concretions, strictures, exposure to cold or even direct injury,—any of these may readily be supposed to lower the vital resistance of an organ such as the appendix which is a vestigial structure, and therefore subject to the all anatomical and physiological imperfections not found in other organs or in other parts of the intestinal tract.

Besides the conditions referred to that tend to produce a locus minoris resistentiae and thus predispose to inflammation of the appendix, we have other causes operating in the intestine that may produce the same result by increasing the virulence of the septic organisms. The mucous membrane of the appendix being continuous with that of the caecum and thus with the intestine in general, it may well be