

thoroughly exposed. Two or three coils of ilium were found adherent to the floor of the pelvic cavity, and the cecum with its appendix, suspended over its rim well into true pelvis. The appendix on being brought up was found to contain an ordinary black pin, the major part being within the lumen of the appendix, with head towards the blind end. About half an inch of the point had pierced the appendix and was outside it near the cecum. The appendix was removed and the adherent intestine separated from floor of pelvis. About two and a half feet of the ilium was bound down and contracted in a number of places to the size of one's finger. This section of the bowel when separated, was found to be badly injured, and would have to be removed *en masse*, as there was no possibility of its recovery. However, the patient died before the operation could be completed.

CASE 6.—*Fecal Accumulation*.—On Sunday, February 11th, 1900, my attention was drawn to a chronic insane female patient, aged 33, with a distended abdomen. Palpation revealed a hard mass in the peritoneal cavity the shape of an enlarged bowel. Percussion produced marked dullness. Temperature and pulse normal. Absolutely no other symptoms present. The patient was known to be an enormous eater. Digital examination of rectum disclosed a hard fecal mass. With difficulty the mass was scooped out with finger and spoon. A quantity of oil was administered internally, and oil enemas were introduced, resulting in the removal of a very large fecal accumulation. She was kept in bed on a milk diet and ordinary treatment. A slight diarrhea kept up for several days. The patient failed steadily, and died on February 20th, 1900. *Post-mortem* showed the descending colon to be very much dilated and of a deep red color, with several small spots of ulceration on peritoneal coat over sigmoid flexure. There was evidently paresis of the descending colon and rectum, together with a condition of intense colitis. Treves ("Intestinal Obstruction," page 276) aptly describes these cases in these terms: "This weakness would appear in some cases to be congenital. It is more often acquired. It is illustrated by the constipation which may attend certain injuries and affections of the brain and spinal cord. It is concerned possibly to some extent with the constipation of the insane and neurotic."

CASE 7.—*Inguinal Hernia (Strangulation)*.—On March 27th, 1900, a female patient at one of the cottages, aged 70, was reported sick. Examination showed a hard swelling in right inguinal region. She gave a history of hernia. She had been sick for twenty-four hours, but had not complained until that morning. She had had an occasional attack of vomiting. She was at once transferred to the infirmary, and operation was