

generally rendered easy by the occurrence of emphysema along the course of the cæcum.

Mr. R. W. Parker mentioned a case of a boy who had injured his abdomen when suffering from inability to pass water. Vomiting ensued for twenty-four hours before death. The vermiform appendix was found to have been perforated, several hard concretions lying within it. There was local peritonitis and general peritoneal inflammation of more recent date.

Dr. Mahomed observed that he would put aside the question of operating during an attack of peri-typhlitis. He thought that an operation would only be admissible between the acute attacks.

Dr. Longhurst mentioned a case where five attacks occurred in two years, ending in ulceration and abscess. He asked if any treatment could be suggested to prevent the liability to such recurrence.

Dr. Finlay referred to the observation of Dr. A. Flint, mentioned by Dr. Mahomed, and said it was familiarly known at the Middlesex Hospital that intestinal perforation might lead to obliteration of hepatic dulness.—*Proceedings Clinical Society, London, in Medical Times.*

The Aspirator as a means of Treatment.

—*Pneumothorax.*—In some cases of traumatic pneumothorax, I think aspiration may be practised with the best possible results. Dr. Herbert Page has published a case in which, owing to a wound of the lung caused by the in-driving of a fractured rib, there was pneumothorax, with total collapse of the right lung. There was great dyspnœa and collapse. The chest was punctured, four hours after the accident, by Dieulafoy's cannula; and, on exhausting the air from the pleural cavity by means of the pneumatic aspirator, immediate improvement in the condition of the patient followed. At the time of the operation, blood was drawn into the receiver; and an examination of the chest on the day after the injury revealed dulness on percussion at the base on the left side, due to the presence of blood. The aspirator was used three times subsequently, for the removal of the blood and the further withdrawal of air from the pleura. The patient made a good recovery. Dr. Page, while admitting the advantages of the