

with his penis at times if not well watched. His mother has arranged his clothes so as to make handling almost impossible now.

His voice is loud, resonant, and raucous, more like that of a full grown man or boy whose voice is "changing" or as the laity say "cracking."

His habits are like those of very much older boys. He disdains the toys of little tots of his own age, preferring those of half grown-up boys.

He is independent in manner, doing things alone or amusing himself all day long. He would stay out of doors the whole day, even in winter, if allowed. He is perfectly self possessed either with strangers or friends, answering fearlessly all questions in a loud, bass, or stentorian voice, utterly unlike that of a child of 4 years.

Many of us have seen momentary erections in a baby of a year or year and a half old, due to full bladder, removal of a napkin, etc. Few of us have heard of seminal emissions in a child of $2\frac{1}{2}$ years of age. I, for one, have not.

I cannot show you the patient, but I do his photo, taken by his father in February last when he was 4 years old.

MEMBRANOUS PERICOLITIS.

By ERNEST A. HALL, M.D., C.M., Vancouver, B.C.

IT has been the experience of many of the younger operators—and the older ones—to find upon opening the abdomen, that the scape-goat of the southwest area of visceral pathology presented an appearance somewhat less active than the proverbial goat of modern literature exhibits. The appendix has carried its load of responsibility with a faithfulness worthy of commendation, but the time has come when its honors are being divided. The competitors are many. Price, Mayo, Lane and last Jackson has enriched our fund of knowledge of conditions simulating sub acute and chronic inflammations of the appendix. Price taught us to examine carefully the last few inches of the ilium for adhesions and occlusions in all cases where the appendix was considered to be at fault. Mayo has repeated this advice, while Lane, dealing with the same conditions asks us to look for a kink in the ilium within a few inches from the valve. Two years ago Jackson, of Kansas City, gave the histories of several cases which resembling chronic appendicitis in which a well defined membrane was found extending from the parietal peritoneum downwards over the ascending colon which was sufficiently dense to cause constriction. In the July number of "Surgery, Gynæ-