

Surgical interference may be required either to stop a bleeding that is going on or to prevent a recurrence. The first is seldom possible as ligating of arteries outside the stomach is useless owing to the free anastomosis and to excise the whole bleeding ulcer is a very severe operation and seldom survived, besides the strict carrying out of internal treatment gives good results. When fearing the recurrence of milder haemorrhages which injure the general health or in the interval between more severe bleedings, a gastro enterostomy frequently gives good results, leading to healing of ulcer. The author believes the healing after the operation is due to pancreatic secretion which neutralizes the H. cl. and pepsin of gastric secretion.

*Haemorrhage from Intestinal Tract.*—Duodenal ulceration and bleeding may be included with that of the stomach and requires the same treatment. Of the various causes of intestinal haemorrhage, many are not serious and require no special treatment. Among those are enteritis, dysentery, intersusception, syphilitic ulceration, amyloid degeneration of mucus membrane of bowels, haemorrhagic infarct of arteria mesenterica, trichinosis, septicaemia, scarlet fever, phosphorous poisoning, nephritis, leukaemia and other blood affections. Cancer of the bowel usually causes rather slight bleeding unless ulceration is into a larger artery, when may be fatal. The conditions are similar in cases of tubercular ulceration, rupture of aneurism of abdominal aorta or other arteries as hepatic into bowel lumen. Treatment then is not possible. Practically the most important causes are typhoid fever and haemorrhoids. About 5% of cases of enteric have a haemorrhage towards the end of the second week or in the third week. Prognosis is serious as about half of cases are fatal.

Patient must be kept quiet in bed, ice-cold fluid nourishment. Alcoholic beverages as well as coffee and tea to be avoided. As to drugs, give 3 or 4 times a day m.v of lig. Ferri sesquichlor with oatmeal gruel and, if not too great apathy, mx tincture of Thebaica. If collapse has a threatening character, give normal saline solution with the addition of 1% to 2% of gelatine. Keep at rest for 8 to 14 days.

*Bleeding from Haemorrhoids.*—Prognosis varies as do the therapeutic measures. In florid full-blooded persons recurring haemorrhages may require no special care which in a weaker person may be dangerous. Overcome constipation by food as far as possible and also by laxatives. Avoid alcohol, tea, coffee and spices. Take out-door exercise and cold sitz baths. If these measures are not sufficient resort to operation.