

McBurney's point, slight fever, no vomiting, bowels moved. The next two days he continued to be slightly feverish, and the tenderness increased, and thickness could be felt in the region of the appendix. On the evening of the 24th his temperature was 104, pulse 120. There was very little tympanitis. Rigidity of the abdominal muscles was marked, especially on the right side. A tender swelling of considerable size could be felt on the right side. I saw him first on April 25th at 9.30 a.m. His temperature at that time was 99.35, pulse 88. Expression was very good. Tongue was furred slightly; there was no tympanitis, on the contrary the abdomen was slightly retracted. The muscles were very tense on the right side. A tumor could be felt on the right side one inch below McBurney's point. This seemed to be about the size of an egg, was slightly movable and very tender. Nothing was felt on rectal examination. Abdomen was resonant all over.

*Diagnosis.*—Appendicitis localized by plastic lymph.

*Operation.*—Oblique incision two inches long was made over the tumor, which was attached to the abdominal wall by very slight adhesions. The mass felt was tolerably freely movable, and consisted of the tip of a rather long appendix surrounded by a process of omentum, the whole being matted together by inflammatory lymph. After packing sponges around the area of the operation, the mass was delivered from the wound without much difficulty, the momentum was tied off by a double interlaced ligature of silk, and after tying the mesentery of the appendix the latter was amputated in the usual way by making a coat sleeve flap. Abdominal wound was stitched up without drainage, silkworm gut being used. On examining the removed mass, the appendix was found to penetrate it to the extent of about one and a-half inches. On dissecting the lymph and the omentum from the surface of the appendix a cavity containing half a drachm of foetid pus was found subtending a gangrenous area of the tip of the appendix about one-half inch in length, and occupying about one half the circumference of the organ. No foreign body was found in the appendix.

Dr. Fotheringham,—The specimen would seem to be an excellent example of what Professor Adami told us at the December meeting, seemed to be one function of the omentum, that it is instantly mobilized on an alarm of inflammation within the abdominal cavity, and sets itself the task of assisting in the fencing off of the inflammatory process.

Dr. Primrose, discussing Dr. Peters' paper, asked as to the origin and ultimate fate of lymph.