Pathologically, we note:

1st.—These inflammations of the appendix induce a greater effusion of serum in children than in adults.

2nd.—That this effusion quickly becomes purulent.

3rd.—The occurrence of gangrene and early perforation is more frequent in the child.

4th.—That abscesses are more likely to form and to rupture in children than in adults.

5th.—That there is greater tendency to spreading peritonitis. (Sprengel found 46.8 per cent. among his cases.)

6th.—That intoxication of the system is more rapid and intense in children.

Clinically.—These differential features assume more than ordinary interest and importance. We have not time to discuss them in detail. We simply mention some of the general principles.

1st.—That appendicitis in the child is more sudden in its onset, rapid in its progress and intense in its symptoms than in the adult.

2nd.—That the unstable conditions of the nervous system (peculiar to children) may lead to confusion or error, and may delay or prevent a positive diagnosis.

3rd.—That abnormal conditions are frequently met with in children which render the clinical phenomena vague and misleading; for example, right-sided pleurisy or pneumonia may simulate appendicitis—the pain, tenderness and rigidity being located in the right iliac fossa. Or in abnormal positions of the appendix (common in children), the pain and other symptoms may be found on the left side of the abdomen, in the epigastric region or under the costal arch.

We feel that a due appreciation of the anatomical, pathological and clinical features already noted should enable us to not only differentiate appendicitis in children from the same disease in adults, but to set it apart as a subject for special and separate consideration in its diagnosis, its prognosis and treatment.

We are told by eminent authorities that "the diagnosis of appendicitis is generally easy." This may be true in adults; it is not true in children. The recognition of appendicitis in the early stages, when operation would be successful, is extremely difficult. The cardinal symptoms of appendicitis—sudden acute pain in the right iliae fossa, tenderness over McBurney's point, rigidity of the right rectus muscle, vomiting, elevation of temperature, acceleration of pulse, etc., which are quite constant