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## ORIGINAL COMMUNICATIONS.

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ART. XVI.—*Two Cases of Intestinal Obstruction from Internal Strangulation, and one case of Inflammation and Perforation of the Appendix Vermiformis.* By GEO. W. CAMPBELL, A.M., M.D., Professor of Surgery, McGill College, Montreal.

The attention of the profession having been of late especially directed to intestinal obstructions from internal causes, by Mr. Benjamin Phillips and Mr. Cæsar Hawkins, in their communications in the 31st and 35th vols. of the Medico-Chirurgical Transactions, and more recently in a very able review of the above and other papers upon the same subject, in the 25th vol. of the British and Foreign Med.-Chirurg. Review, by Mr. George Pollock, I have deemed the following cases worthy of record, as an interesting addition to our present store of information upon this important subject.

The first case, which I met with some years ago, occurred in a young female, 17 years of age, who was suddenly seized during the night with pain in the bowels, accompanied with vomiting and constipation. The retching was very distressing; the matter vomited was at first what had been eaten the previous day, subsequently it was bilious, but it never became fæculent. Three or four stools were at first procured by turpentine enemata, and with momentary relief, but the constipation in a short time became complete, and the injections were passed without admixture. The pain in this case was never very severe; there was no abdominal tension; the tenderness on pressure was slight, and diffused over a large portion of the anterior surface of the abdomen. No swelling nor hardness could be discovered, by careful external examination, in any portion of the intestinal canal, indicating the seat of the obstruction. The countenance, at an early period in the attack, became very anxious, the pulse quick and feeble, and the breathing hurried; there was great prostration, restlessness and want of sleep, but the intellectual