THE MORTALITY IN APPENDICITIS; ITS CAUSE AND LIMITATION.

A. J. Ochsner, Chicago, gives the statistics of his 337 cases. He makes the following suggestions for the treatment of appendicitis with a view of reducing the mortality:

Patients suffering from chronic recurrent appendicitis should be operated during the interval.

Patients suffering from acute appendicitis should be operated as soon as the diagnosis is made, provided they come under treatment while the infectious material is still confined to the appendix, if a competent surgeon is available.

Aside from insuring a low mortality this will prevent a series of complications, mentioned elsewhere in this paper.

In all cases of acute appendicitis without regard to the treatment contemplated, the administration of food and cathartics by mouth should be absolutely prohibited.

In case of nausea or vomiting or gaseous distention of the abdomen, gastric lavage should be employed.

In cases coming under treatment after the infection has extended beyond the tissues of the appendix, especially in the presence of beginning diffuse peritonitis, conclusions four and five should always be employed until the patient's condition makes operative interference safe.

In case no operation is performed neither nourishment nor cathartics should be given by mouth until the patient has been free from pain and otherwise normal for at least four days.

During the beginning of this treatment not even water should be given by mouth, the thirst being quenched by rinsing the mouth with cold water and by the use of small enemata. Later small sips of very hot water frequently repeated may be given and still later small sips of cold water. There is danger in giving water too freely.

All practitioners of medicine and surgery, as well as the general public, should be impressed with the importance of prohibiting the use of cathartics and food by mouth in cases suffering from acute appendicitis.

It should be constantly borne in mind that even the slightest amount of liquid food of any kind given by mouth may give rise to dangerous peristalsis.

The most convenient form of rectal feeding consists in the use of one ounce of one of the various concentrated