

She came to the operating room at 12 o'clock noon, and the anæsthetic, chloroform, was administered by Dr. F. J. Austin. Throughout the whole course of the operation nothing of any moment occurred. The patient was under the influence of chloroform for one hour and fifteen minutes.

The appendix was easily located, but was gangrenous throughout one-half of its extent. As there were no adhesions, the appendix was quickly removed and the stump inverted, and a purse string suture applied, an extra row of Lambert sutures covering in the meso-appendix and appendix. The wound was closed by the layer method, no drainage being used.

As I had to leave for Montreal within half an hour after the operation was completed, I referred the case to Dr. W. W. Lynch, to whom I am indebted for the following report: The patient regained consciousness from the anæsthetic very quietly, vomited slightly at 7 p.m., and was nauseated until 11 p.m., when she became rather restless. Morphia 1-16 was given hypodermically, after which she passed a quiet night, sleeping well until 7 in the morning, when she appeared much brighter. From 7 p.m. to 7 a.m. 25 ounces of urine was passed. All day Saturday the patient was quite comfortable, being only slightly nauseated at 5 p.m. The pulse ranged from 90 to 98, temperature 97. The amount of urine from 7 a.m. to 7 p.m., 19 ounces.

At 1 a.m. Sunday the patient complained of slight pain in the abdomen and soon became very restless. This restlessness increased during the night until it assumed a very marked form of hysteria towards morning. At 9 a.m. the patient became delirious and very violent, requiring the constant attendance of two nurses to control her. A sixteenth of morphia was given followed in an hour by another sixteenth. At noon the patient became comatose and remained so for one hour. At 2 p.m. the delirium recurred, there was incontinence of urine and vomiting of dark brown fluid. This was followed by profound coma. This condition was present up to the time I saw the patient at 10.30 Sunday night, after my return from Montreal. Examination made during the day on Sunday showed normal reflexes, no ankle clonus, Babinsky's sign negative, pupils reacted to light and were slightly dilated, corneal reflex slow and at times absent, no retraction of the neck or tender points about back or abdomen. Heart and lungs negative. No paralysis and slight cutaneous anæsthesia.

On my return from Montreal I immediately went to the hospital and found the patient in a desperate condition, pupils dilated, corneal reflex absent, patient vomiting intermittently thin, watery, brown fluid, profound coma, no paralysis, but a slight rigidity of the muscles of the