

acute cases there is not complete obstruction of the bowel, but gangrene of the intussusceptum is very likely to occur, with possible perforation and septic peritonitis, causing death in from four to seven days in children, and in from three to four weeks in adults.

If these cases are to be treated with greater success in the future than they have been in the past, it must be through early recognition and more prompt interference. Treves says that when in an acute case days have been allowed to elapse, the prospect of success by operation is so slight that, so far as statistics at present indicate, it is better to leave the case to nature. Recovery is rare in those cases where reduction is very difficult or impossible, or where gangrene has occurred, making a resection of the bowel necessary. Charles Clubbe, B. M. J., November 6th, 1897, reports fifteen cases of intussusception, with seven recoveries. Three of his successful cases were seen early, and reduced by means of olive oil injections by rectum, and in only one of the remaining four cases was the bowel materially injured.

In my own case, where the operation was performed fairly early, the invagination was found to be extensive, and the wall of the cæcum barely escaped necrosis. A few hours' delay under treatment, say with opium, or by attempts at reduction by rectal injections, and I am satisfied that there would have been a less happy result.