

The operation lasted an hour and a half. A half hour after the operation his temperature was 98°, pulse 120, respiration 36. As there had been but little discharge through the tube, it was removed, and the opening sewed up on the second day. The patient was then doing well, but on the third day the abdomen was considerably distended and painful to pressure. In the afternoon of that day his bowels moved spontaneously, after which the distention disappeared.

On the seventh day a fecal fistula was noted. This, however, was not large, and remained open but four days. After this his recovery was uninterrupted. He remained in the hospital four months after the operation, working as a detail around the institution. When discharged he had grown quite stout, and was in the enjoyment of perfect health.

The accidental cutting of the intestine in this case teaches that in operating for ventral hernia the incision should always be made to the side of the cicatrix in sound tissue, as there are no means of determining beforehand in what cases adhesions have taken place between it and the intestine.

Possibly it might have been better not to have operated on this patient; the reduction of the mass and an elastic support might, perhaps, have been better. But when we consider that the tendency of such a hernia is to steadily enlarge, even with elastic support, especially in the laboring classes, we must believe that the operative procedure is the better one.

Had I to perform the operation to-day, I should close the ends of the intestines, employ lateral anastomosis, and should not resect the mesentery, but would close it, as advised by Senn.

THE DIAGNOSIS OF PAGET'S DISEASE OF THE NIPPLE.

Surgeons and dermatologists have not infrequently hesitated over a case of chronic inflammation of the nipple resembling in its external appearance an eczema, doubting whether the radical operation of excision of the breast should be undertaken; or, in other words, doubting whether they stood in the presence of what was really chronic eczema, or that affection which long ago Paget taught was likely to

be followed by a carcinomatous involvement of the gland. Failure in the ordinary applications for eczema, the absence of itching, suspicious induration and long-standing duration, have been the clinical data upon which a diagnosis was usually founded.

Darier, in April, 1889, made a communication to the Biological Society of Paris concerning a new form of *psorospermia* found in "Paget's Disease of the Nipple," describing the parasitic *sporozoa* as occurring inside the epithelial cells of the affected parts. These observations have been confirmed and the whole subject greatly elaborated by Louis Wickham in his admirable monograph, "Mala-die de la Peau dite Maladie de Paget." According to these authors, the parasitic bodies are found usually in the lower layers of the epidermis of the diseased tissue, and also in the milk-bearing ducts, and measure from one-third to one-half of the stratum mucosum. So impressed is Wickham with these discoveries, that in the conclusion of his essay he states that Paget's disease is due to the parasites of the class *sporozoa* and the order *coccidia* or *psorospermia*, and should be relegated to the group *psoropermosis*. He believes, moreover, that the presence of these bodies, readily detected by microscopic examination of the crusts from the diseased nipple, constitutes an excellent and rapid method of diagnosis.

Further confirmation of these observations comes from Dr. A. B. Macallum (THE CANADIAN PRACTITIONER, Oct. 16th, 1890), who has examined two cases of Paget's disease, and found the bodies in question. In order to avoid disputed points in pathology, Macallum suggests the word *endocyte* as a neutral and readily applicable term to describe these bodies until their true nature shall be exactly determined. Darier advises that the crust shall be teased out on a slide in Gram's iodine solution and examined with a moderately high-power objective. If fat is present, this may be removed by placing the specimen for several hours in a 10 per cent. solution of ammonia. Macallum modifies this method and secures a permanent preparation by attending to the following directions: The crust, or a portion scraped from the nipple, is teased out in a drop of tincture of iodine on the slide, the cover