

bowels; violent gripings occur every 20 or 30 minutes." No thirst, but dryness of mouth, tongue white, skin cool and moist, pulse 80, and soft. Aperients having been administered, an alvine evacuation was procured in the evening, with temporary benefit. After a restless night, the general symptoms were stationary, but the pain and griping were on the increase, although the bowels had acted; the conjunctivæ acquiring a yellow tinge. A free blood-letting at 3 P. M. was followed by faintness, a "copious liquid stool," much datus and relief. The calomel was continued every hour. At 7 P. M. he was "better than at any time yet, but that little place is always very painful, and the griping, though less often, is very severe." Morphia was added to the calomel, and a blister applied.

At 2 A. M. on the 3rd, the patient became *suddenly* worse; the surface cool; pulse 90, and weak; pain in the part intense; running down to the anus and end of the urethra; mouth dry. He observed to his physician, "If you could only open that small place, how it would relieve me." 12 leeches were applied. At 9 A. M. the surface had become warm; the pulse 120, small and hard; the abdomen tense, and the pain more diffused. At 1 P. M. the "pain had shot all over the abdomen"; pulse 140, small and hard; breathing hurried; 18 leeches were applied, and a large blister. At 9 P. M. the symptoms much aggravated. He died at 2 A. M. on the 4th. The section exhibited, besides general peritonitis, a gangrenous state of the appendix vermiformis, which contained two small portions of gall stone, and a little thick dark fluid. The mucous lining of the cæcum was quite normal.

In the March number of the same journal, and year, Dr. Holmes, Prof. of Medicine in this College, also published an example of the same affection. The subject of it was a large, healthy child of 20 months. "He became indisposed on the night of Thursday, (10th March, 1842), being restless and feverish, but not complaining of pain.

"The next day he was languid and dull, indisposed to exertion, and unwilling to be amused. On the Sunday he appeared better, but on Monday relapsed into a dull, quiescent state, not seeking to leave his bed, disliking the approach of other children, and unwilling to be disturbed, yet without any marked symptom of disorder. He continued without much alteration till Thursday (17th), appearing to have no particular uneasiness, except a feeling of tenesmus, and an inclination to remain a long time at stool. During this time he had taken some doses of laxatives. He had made no complaint of pain or griping; there was no swelling of the abdomen; and no pain had been observed to be felt on handling him.