

seen in cases of ordinary suppuration about the appendix, seemed to be relatively common. These two forms of the affection were similar to what is sometimes seen when the disease occurs in other parts of the body, such as the cheek. Attention was called to the tendency of the abscesses which form to burrow, and point at a distance from the original seat of the disease, and a comparison made to what often occurs in the same affection of the lungs.

The question was raised as to whether the so-called secondary streptothrix affections of the liver were really conveyed thither by the bloodstream, or whether they were not really an independent infection from the alimentary canal; in one of the reported cases the discovery *post mortem* of a streptothrix abscess in the head of the pancreas was quoted as an argument in favor of the latter view. The points that would be likely to be of help in arriving at a diagnosis in the simple cases would be a long history of slight indefinite pain in the region of the appendix, a relatively large amount of induration, and, if operation were performed, the small quantity of broken-down material found; in suppurating cases the occurrence of rigors early, and the pointing of abscesses at a distance from the appendix region.

The treatment should be both constitutional and local. In the simple cases the best results follow removal of the appendix and as much of the affected surrounding tissue as possible, combined with treatment by large doses of iodide of potassium. The suppurating cases are more serious, and little benefit is likely to be derived from the use of drugs until the septic condition has been dealt with by ordinary surgical measures, and it was pointed out how exactly this coincided with what is experienced in dealing with the affection as it occurred in other parts of the body.

Reports on Tongue-like Accessory Lobes of the Liver, and Achylia Gastrica. By JAMES NEWELL, PH.B., M.D., M.CH., of Watford, Ont., late Professor of Therapeutics in the Michigan College of Medicine and Surgery, Detroit, Mich.; late Physician to the Detroit Emergency Hospital; in *American Medicine*.

This malformation is also known as linguiform lobe, partial hepatoptosis, Riedel's lobe or appendicular lobe. My attention was particularly directed to the malformation by an article by Dr. Alex. McPhedran, of Toronto, published in the *Canadian*