

dix to be curled upon itself, or bent at various angles, thus partially constricting it in one or more places.

One can easily understand the various positions in which this organ is found, when we consider its attachment to the end of the coecum, which of itself does not occupy a fixed position in the abdomen.

The wall of the appendix is similar to that of the colon, and its mucous membrane is richly supplied with glands. A fold of the mucous membrane forms a more or less imperfect valve, between itself and the coecum.

In this small tube, which is about the size of a goose quill ending in a blind extremity, we find in the normal appendix some mucus, and a great many bacteria, amongst them, pus cocci and bacterium coli. To my mind this is an ideal culture tube closed at one end, moist with an even and regular temperature, and the presence of bacteria.

What is going on in this blind sack? Faecal matter more or less liquid, finds its way into this narrow channel, which has to be returned through this common orifice of entrance and exit by peristaltic action of the appendix, working against pressure from within the coecum.

As this passage is frequently tortuous, curved, or constricted from various causes, such as kinks or twists due to too short a mesentery—narrowing due to involution going on in the mucous membrane which may reduce the organ in time to a fibrous cord—ciccatrization from within, or adhesions about the appendix the result of previous attacks. All or any of these conditions when present or a pendant position of the appendix will interfere with peristaltic action, and the organ will be unable to empty itself.

Minute solid particles of faecal matter lodged in the appendix lead to the formation of one or more concretions, some of which may reach the size of a hazel nut. These also by narrowing the lumen interfere with peristalsis. It is much easier for anything to get in than to escape from this blind passage, especially when its lumen is narrowed at one or more points, or when it is bound down by adhesions.

The various conditions mentioned tend to increase the pressure within the appendix, and it is well known that bac-