

that a bullet has passed through and through the body without causing death; and the bayonet has a thousand times been pushed through the belly and made its appearance opposite, and still the soldier lived; the sword of the duellist, in innumerable instances, has pierced the antagonist and pinned him to the ground, and still he got well; and I have witnessed a few cases, where pitchforks have entered the whole length of the prongs, yet death did not ensue, and such events have been so frequent that they cannot be called exceptional cases. Seeing, I thought, it was impossible that in all such occasions, the intestines and other viscera could escape injury, how was it, that their contents did not flow out into the abdominal cavity? Because, I replied in my soliloquy, for I had no one to consult with, there is in reality no cavity or empty space there; all is filled up and kept in juxta-position by the abdominal muscles and atmospheric pressure, to overcome which it would require considerable distention in the bowels, or an increased or inordinate activity of the peristaltic motion. In this case, both stomach and bowels had been pretty freely emptied by vomiting of stercoraceous matter; and the collapse that would naturally ensue, and indeed existed, would for a time at least keep all in a state of quiescence, than which, no event could be better adapted to prevent excitement and inflammation. On these principles it was, I felt pretty sure, that there could be no effusion into the peritoneum, nor much inflammation to be apprehended. The result fully justified my expectations, if it did not completely confirm my reasoning on the subject.

Not long after the above occasion, I obtained "John Bell on Wounds," and was highly gratified to find that he corroborated the views I entertained with regard to wounds of the abdomen. At page 324, 3rd Ed., we find the following graphic remarks: "The whole mass of the bowels is alternately pressed, to use a coarse illustration, as if betwixt two broad hands, which keep each turn of the intestine in its right place while the whole mass is regularly moved," and goes on to say, "we find a person, after a wound of the intestine, having free stools for many days; and what is it that prevents the fœces from escaping, but the regular and universal pressure?" On this, as on most other subjects, this eminent surgeon expresses his sentiments with peculiar clearness, a good sense that is at once convincing, and in a style that leaves a lasting impression. He thus explains the cause of the prompt healing of certain injuries of the bowels: "The tendency of the peritoneum to inflame is the chief cause of danger, as *also of the only means of safety.*" "It is thus that in a few hours the adhesion is begun that is to save the patient's life."

On entering upon my career, Pott was the great authority of the day on surgical matters; one which on most important points in surgery is referred to, or cited at the very time as a sure and safe guide, and one