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Original Communications.

CASE OF PERITYPHLITIS.

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On the 16th March I was asked to see Mr. J. M., æt. 38 years, a man of medium height, spare build, dark hair and complexion. I went to his residence, and found that he had been sick for about a fortnight, under the care of Dr. Rodger, who, being exceedingly busy, had requested them to get some one else to attend.

I found well-marked symptoms of saturnism present—a pale anæmic look, together with an icteroid tinge of the integument and conjunctiva, fætor of the breath, a blue line along the margin of the gums, furred tongue, anorexia, constipation, muscular weakness, and severe paroxysmal pains in the abdomen, confined to the umbilical region. The abdomen was slightly tympanitic, and pressure and percussion over the abdomen were moderately well borne. His temperature was 99.5 F., pulse 92. The integument over the right iliac region was œdematous, and presented many bluish spots, giving to it a peculiar mottled appearance. On pressure being made in this region there was an indistinct feeling of localized fullness, and

the patient complained of pain. The percussion note over this circumscribed fullness was dull, but quite clear and tympanitic all around. The tumor was deep-seated and immovable. No fluctuation could be made out. Digital examination of the rectum discovered nothing. Liver and spleen were a little enlarged, heart and lungs healthy. The only cause he could assign was that a couple of weeks before he took sick he had strained his right side in lifting. He felt it sore for a few days afterwards. Dr. Rodger told me that the patient had had some local peritonitis in the right iliac fossa, and that he had had mustard and turpentine applied, followed by linseed-meal poultices. As he still complained of some soreness here, I had the poultices continued. On the 18th he had a little diarrhoea, and I ordered Castor Oil $\frac{3}{4}$ ss., which relieved it.

On the 20th he had a rigor, and from that date until the 5th April, a period of 15 days, he continued to have rigors, which were irregular in time of occurrence, and varied in severity and duration, generally having 2 or 3 in 24 hours. Occasionally he had none for a day or two. They were all attended by a high fever, the temperature running up to 104° or 105° F., and on one occasion, immediately after a severe rigor, his temperature was 106. They were followed, as a rule, by profuse exhausting perspiration, and the temperature would fall to 99 or even normal. They were either accompanied or followed by retching and vomiting.