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TYPHOID FEVER: SIGNS POINTING TO A PROBABLE  
PERFORATION OF THE BOWEL: OPERATION,  
ABSENCE OF PERFORATION OR ANY  
LESION OF PERITONEUM.\*

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It is a common saying that we learn as much from those occasions on which we are mistaken as from those on which we are right. The following case, I think, illustrates this sufficiently well.

H. C., 39 years of age, unmarried, returned, on October 7th, to Montreal from a ten days' trip to New York. She was in her usual health until October 11th, when she began to have pains in her bones and felt miserable. There was no improvement the next day, and during the afternoon of October 13th she complained of headache and chilliness. On the evening of the same day she felt feverish, and had nausea with a little vomiting. There was no epistaxis. She had no appetite, but great thirst, and the bowels were constipated.

I saw her for the first time on October 15th. At that time the face was flushed, the tongue coated in the middle, the temperature 102° F., and the pulse about 100. There was otherwise nothing to be made out by physical examination, but suspecting typhoid fever, I advised her removal to a private ward in the hospital, in case baths would have to be given. She was removed to the Montreal General Hospital on October 16th. Widal's reaction was present on October 17th and 18th, the diazo-reaction on October 18th, disappearing the next day.

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\* Read before the Montreal Medico-Chirurgical Society, Nov. 30, 1900.