

gall-bladder and any part of the intestinal canal had occurred. Thirdly, the perforation after a slight traumatism and, finally, the extraordinary course of the pus, which found its way into the lung three weeks after operation. In explanation of the latter condition, I believe that it must have found its way into the mediastinum along the right crus of the diaphragm.

It would, of course, be absurd to draw general conclusions from such a small number of cases as I have been able to report in the present communication; but when, on the one hand, such an overwhelming number of cases of appendicitis are due to causes other than the presence of foreign bodies in the appendix (causes with which we have at present no concern), and, on the other hand, when the cases which have been observed of foreign body in the appendix seem to show that the foreign body had no such causative relation to the disease; and, finally, when these facts are *a priori* in accord with the results of general surgical experience, the conclusion would seem to be almost irresistible that such foreign bodies have no essential relationship to the condition which is so widely and generally known as appendicitis. I am well aware that it is unnecessary to argue this point, as no one at the present day would seriously dispute the foregoing conclusions, but the discussion of this subject has given me the opportunity of placing on record a couple of very interesting cases, and calling attention to a cause of intestinal perforation which has not heretofore been generally recognized.—*Phila. Med. Jour.*

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EFFECTS OF TIGHT DIAPERS.—A. T. Cotton (*Arch. of Pediatrics*), thinks that the ordinary diaper of unyielding material, pinned tightly about the plastic pelvis of an infant, in which the ossification of the bones is not yet completed, may be responsible for pronounced deformities. The contracted pelvis, the most frequent cause of dystocia in America, he thinks, may be due in a considerable measure to the compression of the American diaper. The practice also of wadding a large amount of inelastic material tightly between the thighs is plainly responsible for deformities of the femora. There is little doubt in the mind of the author that many cases of genu valgum have their beginning in this cause. To obviate these defects Dr. Cotton advocates the use of light diapers, and no more material than is absolutely necessary for the absorption of discharges. Absorbent cotton, either loose or in pads, preferably the latter, retained by a T bandage or triangle of some flexible material, such as cheese cloth, secured by safety pins to the shirt, before and behind, has been found to meet all the requirements.—*Pediatrics*.