

The intussusception was found to be of the ilco-cæcal variety; the cæcum had been swallowed by the ascending colon, the tumor increasing in size at the expense of the intussusciens or outer tube. The invagination was reduced without any particular difficulty by pressure from below the mass, combined with gentle traction on the ileum and cæcum; the adhesions being recent, were separated without damage to the bowel wall. The cæcum was much swollen, and at the point of greatest constriction was bloodless, and of an ashy grey color. The remainder of the cæcum, together with the ascending and transverse colon, was very red, with extensive extravasations of blood beneath the serous coat. The ascending, transverse, and upper part of the descending colon had been much dilated to receive the intussusceptum. The meso-cæcum and meso-colon were unusually long. It was thought advisable to remove the red and greatly swollen appendix, but, as the circulation was seen to be gradually returning to the blanched portion of the cæcum, the latter was fastened by suturing it to the parietal incision. Finally the small intestines were returned, the peritoneal cavity dried with sponges, and the abdominal incision closed without drainage. Little or no shock followed the operation. The patient came out of the anæsthetic quietly (A. C. E. mixture); no vomiting. The temperature, which was 104° F. at mid-day, or just before the operation, fell gradually, and at midnight was only 100° F.; the pulse, too, improved in character and became slower, dropping to 120 per minute. The bowels moved satisfactorily thirty hours after the operation, after an enema of glycerine and warm water, and they continued to act either naturally or by the aid of enemata once or twice daily. After the first twenty-four hours the child was allowed the breast.

December 28th.—Two sutures were removed, which were found to be cutting. There was also a small stitch abscess.

December 30.—The remaining sutures were removed. The incision healed by primary union.

January 1, 1898, fourteen days after the operation, the patient was allowed to be taken to her home, where I saw her on the following day, playful and perfectly well.

*Remarks.*—Intussusception may occur at any age, but 50 per cent. of all cases are said to occur before the age of 10 years, and half of these occur during the first year of life. It is the most common cause of intestinal obstruction in children. According to the statistics of Treves 70 per cent. of all cases terminate fatally. In the more acute cases death may occur in from one to two days from intestinal strangulation, with or without perforation and peritonitis. In the less