

changes alone, as other conditions—such as ovarian abscess, pyosalpinx, ectopic pregnancy, perinephritic abscess, hepatic abscess, cholecystitis of the gall-bladder, and malignant disease of the cecum—have all been known to give difficulty in diagnosis from appendicitis, and in each of these examination of the blood may show similar conditions. The non-occurrence of leucocytes in typhoid fever is, however, of assistance.—*Medical Age*.

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#### TYPHOID BACILLI IN URINE FOR A LONG TIME.

Busing (*Deut. med. Woch.*, June 19th) reports a case which is of great importance, in showing that the urine may be infectious long after the patient has recovered from an attack of typhoid fever. On April 6th he examined a series of urines of the soldiers who had been in China, and who had been attacked by typhoid. Of sixteen specimens fifteen proved to be free from typhosus bacillus, but one contained bacilli which both morphologically and biologically correspond to the characters of *B. typhosus*. The patient had been attacked in Tien Tsin on October 10th, 1901, and was discharged as well on Christmas Eve, after he had been convalescent for about two and a-half weeks. The specimens continued to contain bacilli on April 7th, 8th, and 17th, and only on April 19th were no more found. Busing points out that in spite of the absence of all symptoms *B. typhosus* had been present in considerable quantities for over four months, since the beginning of convalescence. It is therefore of utmost importance from a hygienic point of view to examine the urine of all typhoid patients before discharge, and as long as bacilli are found in the urine to disinfect the same with utmost care. Another interesting point in the case lay in the fact that from April 18th he was given urotropin, and the bacilli disappeared on the following day. He states that he has observed the same potent action of urotropin in destroying the bacilli in urine in other cases.—*British Medical Journal*.