

and about an ounce of dark colored serum spirted out ; it was then opened from end to end, and immediately the bowel bulged out ; it was of a deep chocolate hue, indeed it was so dark and livid, that I should almost have taken it to be mortified, if Traver's work on "Injuries of the Intestines" had not been present to my mind. It was with the utmost difficulty I could insinuate the tip of my finger under the tight, hard edge, of the ring ; a slight touch with the bistoury caused the tense tendon to expand considerably, quite sufficient for any common case of rupture ; it was dilated again and again, but the bowel would not recede, notwithstanding that I urged it forward with my expanded hands, gently, but persistantly ; it being so extremely tender and distended, that further effort, I apprehended, would cause it to burst, and thus make matters worse. Under this emergency, I at once plunged my lancet, transversely, in the bowel, when out gushed at least a pint of liquid fæces and serum, and a good portion of gas ; the bowel, perforated as it was, was returned into the abdomen ; the wound closed, and a large soft compress was put over the inguinal region, and confined there by means of a broad flannel band, with which the abdomen was swathed. The utmost quietude was enjoined ; nothing but a spoonful of tea or weak broth, at distant intervals, was allowed. In the evening, an enema was administered, which brought away some fæcal matter and wind. Not a single unfavorable symptom occurred, and in a few weeks, he was quite well, and lived to the good old patriarchal age of four-score years.

Since that time I have punctured the intestine on a few occasions, and I must be candid enough to admit, on a couple of them, without absolute necessity, yet did not the smallest appreciable injury arise from the procedure.

Perhaps a few remarks on the above case may not appear irrelevant or inopportune ; and may, perhaps, have the effect of drawing the attention of other operators to a line of conduct, new to them, perhaps, but which, under similar contingencies, they may be disposed to follow, and I trust, with equal success.

When I performed the above operation, I had not seen John Bell's matchless work on wounds, a work, which it is quite safe to predict, will ever be looked upon as a standard and correct authority on the nature and cure of wounds, else it might be suspected that I had, in a great measure, been guided by his remarks on wounds of the intestines. I was, however, influenced by the very same reasoning that induced him to come to the conclusion that injuries of the bowels were not so dangerous or necessarily fatal, as it was thought they were, in his day, and as they are deemed to be, at this very period. This is the logic I used on the occasion. If wounds of the abdomen were so fatal, how comes it,