a deduction as acute pancreatitis, to run the risk of withholding the aid which all confusing diagnoses so urgently demand, and, in all of which prognosis under surgical art, promptly applied, is so favorable.

But most diagnoses are sufficiently accurate, we should say, to enable us to decide what is medical and what is surgical. And yet are they?

An illustrative case at once suggests itself—a case in which my diagnosis was acute haemorrhagic pancreatitis, and Fitz's acute intestinal obstruction. I operated upon the patient (Vol. LXVII., p. 161), a man of fifty-six, with little hope, and that little based upon the possibility—nay, probability—of my being wrong. Fitz was very positive of his diagnosis, and I could not shake it in the least. I cut down upon a peritoneal cavity that was full of blood, and hastened to congratulate myself on the accuracy of my deduction, forgetful of that pride "which goeth before destruction." The blood came from passive congestion of six feet of small intestine, strangulated in a hole in the omentum. Fitz's diagnosis was as brilliant a piece of deductive reasoning as I ever saw.

The real borderland case is not, however, so much the one in which the operation is hopeless as the one in which surgery offers no better chance than medicine—if, indeed, it offers as good.

The one great example of this kind of a case is the neurasthenic with questionable lesion, especially of the uterus, ovary, appendix, or kidney. I should place the patient with a movable kidney in the category of the borderland. And yet, from another point of view, the movable kidney is a mechanical defect relievable only by mechanical art. The borderline here is in the case itself. Some movable kidneys are distinctly surgical, and even if the patient is a neurasthenic, that neurasthenia is one of the results of the imperfection. The same thing may be said of the chronic appendicitis, the painful ovary, and the misplaced uterus. And it takes a very little experience in surgery, medicine, and neurology to tell the case which demands surgery or medicine or neurological treatment.

I am convinced that by far too many neurasthenics are operated upon, for a recovery under surgery is the exception rather