

the sudden tension of the peritoneum [*sic*] would cause pain if there were inflammation, not to be elicited in any other way. Attention is further called to the cases having the characteristics of general sepsis, where only a very careful examination will allow the diagnosis to be made by exclusion. The indications for operation the author puts as follows: Cases with strictly localized process, which show a tendency to improvement, had best not be operated upon during the height of the attack. But one attack is a direct indication for removal of the appendix after recovery. Whenever there is distinct indication of abscess formation, abscess should be opened and drained. Cases that begin very severely, and grow progressively worse, should be operated upon as soon as possible. The question of operation in those severe cases which show the picture of septic peritonitis, is one of the most difficult in this entire chapter of surgery. Each case of this class must be decided on its own merits; but it is not to be forgotten that when these cases are seen it is often too late to operate.—*Deutsche Mediz. Wochens.; Medical Review.*

APPENDICITIS; ITS DIAGNOSIS AND TREATMENT.

W. J. Means submits a report of 112 cases that came under his observation, with the following conclusions: (1) An early diagnosis of appendicitis is desirable and possible if the few cardinal symptoms are understood, such as pain near the umbilicus, tenderness in the ilio-cecal region, tympanitis and rigidity of the muscles in the lower right quadrant of the abdomen. (2) Too much significance should not be placed on the absence or presence of pain, and high temperature; both may be absent, while grave pathologic conditions are going on; they may also be present to a high degree without determining the pathologic status. (3) Appendicitis is a surgical disease and should be treated from a surgical standpoint. (4) From the nature and location of the disease there are no known remedies given internally or applied externally that can remove the trouble. (5) The pathologic conditions of a diseased appendix cannot be definitely determined by external examination or from the existing symptoms. (6) Early operations give the best results. (7) The time for operation is when the diagnosis has been made, providing the environments of the patient are favorable and there are no complications precluding the same. (8) The technique of the operation is governed largely by the taste of the operator and the pathologic conditions.—*Four. Am. Med. Assoc.; Medical Review.*