

tumor), 6 were treated by primary suture, with 3 cures and 3 deaths (50%); 9 by drainage, with 4 cures and 5 deaths (54.5%). He considers that these results indicate the error of extensive and illusory drainage of the peritoneum.

Kryloff⁵¹ reports 40 cases of typhoid perforation peritonitis, with 8 cures and 32 deaths (80%). Eight of these were operated upon within four hours after perforation, with four cures and four deaths (50%); three between four and twelve hours after perforation, with 3 deaths (100%); eight between twelve and twenty-four hours after perforation, with eight deaths (100%); five at the end of twenty-four hours after perforation, with four deaths (80%); two on the second day, with one cure and one death; one fatal case operated upon on the fourth day. In 13 cases, in which there was no definite history as to the exact time at which the perforation occurred, there were two cures and eleven deaths (84.6%).

TABLE SHOWING THE IMPORTANCE OF EARLY OPERATION.

Surgeon.	Varieties of Peritonitis.	No. of Cases.	Time since Onset.	Cures.	D'ths.	Mortal-ity.
Hartmann...	Appendicular	15	Within 36 hours.	15	..	10%
Hartmann...	Appendicular	10	Within 48 hours.	9	1	10%
Hartmann...	Appendicular	13	From 2 to 4 days	8	5	38.5%
Hartmann...	Appendicular	8	After 4th day	..	8	100%
Hartmann...	Perforating Gastric and Duodenal Ulcer	53	Within 12 hours.	37	16	30%
Hartmann...	Perforating Gastric and Duodenal Ulcer	38	In 12 to 24 hours	16	22	58%
Hartmann...	Perforating Gastric and Duodenal Ulcer	29	In 24 to 48 hours.	7	22	76%
Murphy	Chiefly Appendicular	50	In 3 to 40 hours.	48	2	4%
Siegel.....	Wounds involving Digestive Tract	..	Within 4 hours..	..	..	15%
Siegel.....	Wounds involving Digestive Tract	..	In 5 to 8 hours..	..	..	44%
Siegel.....	Wounds involving Digestive Tract	..	In 9 to 12 hours.	..	..	63.6%
Siegel.....	Wounds involving Digestive Tract	..	More than 12 hrs.	..	..	70%
Kryloff.....	Typhoid Perforation.	8	Within 4 hours...	4	4	50%
Kryloff.....	Typhoid Perforation.	3	4 to 12 hours....	..	3	100%
Kryloff.....	Typhoid Perforation.	8	12 to 14 hours	..	8	100%
Kryloff.....	Typhoid Perforation.	5	In 24 hours	..	4	80%
Kryloff.....	Typhoid Perforation.	5	In 24 hours	1	4	50%
Kryloff.....	Typhoid Perforation.	2	In 2 days	1	1	50%
Kryloff.....	Typhoid Perforation.	1	4th day	..	1	100%
Kryloff.....	Typhoid Perforation.	13	No definite history	2	11	84.6%

CONCLUSIONS.

1. I should like to strongly emphasize the necessity for early operation in all cases of acute appendicitis. In this way the majority of the cases of diffuse peritonitis dependent upon the appendix would be avoided.

2. The necessity for early recognition of peritonitis and prompt surgical intervention.

3. The importance of a rapidly performed operation, with as little handling of the intestines as is consistent with the removal of the primary cause of the peritonitis.