

## OXYURIS VERMICULARIS IN THE APPENDIX.

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The patient from whom the appendix was removed (a photograph of which is herewith presented), was a sturdy-looking farm laborer, aged twenty-four. He gave a history of having been kicked by a cow some two years ago. Since that time he had suffered from intermittent pains in the stomach and bowels, with flatulence and indigestion.

An examination some four months ago was negative. A second examination showed slight tenderness over the appendix. Temperature normal. He accepted my suggestion as to the advisability of removing the appendix. The superficial vessels of the appendix were engorged, the mucous membrane very much thickened, but no stricture present. No other abnormal conditions were found within the abdomen. A colony of pin-worms was found, located for the most part toward distal end. The microscope showed innumerable ova upon the surface of the mucous membrane.

This is the third case in which I have found this parasite in the appendix. In each case there were vague symptoms of chronic appendicitis, with flatulence and pain radiating towards the epigastrium, with slight tenderness over the appendix. Disorder of motor and secretory functions, as causative of the indigestion, is explained through the irritation of the sympathetic ganglia within the bowel-wall, by the parasites, snugly domiciled in the most dependent part of the appendix. To this we must add the absorption of the toxic excrement, which sufficiently explains the symptoms exhibited by these cases. The absence of abnormal temperature is a matter of little importance, since of all orthodox symptoms that of temperature in abdominal diseases is the least reliable. The frequency of the appendix as a breeding-place for parasites explains the great difficulty with which we so often meet in our efforts to dislodge this worm, as there is evidently a continuous stream of ova being discharged from the appendix into the cecum.

Clinical evidence is yet insufficient for us to assume that parasites within the appendix are causative of acute suppuration or post-cecal abscesses, but cases have been reported in which worms have been found in the peritoneal cavity after perforative appendicitis. In favor of this view, I will refer to a case which came under my observation; it is at least suggestive. A male child, aged four, had for two years passed large quantities of pin-worms, which