

with fluid fæces. Below this, the intestine was contracted so as scarcely to admit the little finger; and this contraction extended throughout the remainder of the intestine, downwards about twenty inches, through the rectum to the anus. A rent was made whilst removing the intestines from the body, in the mucous membrane of the sigmoid flexure of the colon, from the weight of the feculent matter above the stricture."*

In the first of these cases, the strangulation of the bowel arrested the descent of the flatus and feculent matters, and below this, the intestine is empty and contracted. In the second case we find a strong contraction of the bowels to the extent of twenty inches, preventing the further descent of the matter along the canal. Was this a natural or morbid condition of the parts? Pathologists who believe that the distention of the parts above, was totally unconnected with this contraction of the parts below, consider this portion of the bowel to be in a natural condition, but empty and contracted. But we are of opinion that we do not find a portion of the bowel in its natural healthy state, either in the dissecting room, or during pathological researches, so strongly contracted as this,—and that it depends on morbid excited action of the parts, and gives rise to the distention that exists above. Dr. Boyd of St. Marylebone Infirmary, lecturer on Practice of Medicine, who examined the state of the parts after death, and reports the case, seems to entertain the same view, for he terms it a *stricture*.†

What is the cause of the contraction of a portion of the bowel? We have already seen that the urethra becomes so firmly contracted during irritation of its mucous membrane that suppression of urine is produced, requiring the catheter for its removal. And in the experiments of Magendie on animals, whilst the lower part of the œsophagus was contracted, he was unable to force any of the contents of the stomach into it, but during its relaxed state, fluids escaped into the œsophagus from the stomach by the force of gravity alone (Muller); and there can be no doubt that a part of the intestinal canal may become so strongly contracted, on irritation of its mucous membrane, as to resist the impulse from above. This we have distinctly seen in analogous cases to which we have referred, the contracted portion of the bowel, being reduced far below its natural calibre, and we believe this is a general law in the animal economy.

A gentleman aged 31 years, was seized with sickness, vomiting and severe twisting pain in the bowels, confined chiefly to the left of the umbilicus, and occurring in paroxysms. Could bear pressure over

* Edinburgh Medical and Surgical Journal, No. 151—page 274.

† *Ibid.*