

morning of the 22nd, when he found that she was dying, and Dr. Thompson and I were hastily summoned. Under the circumstances the Coroner was notified, and ordered an inquest. At the autopsy was found a general acute peritonitis, of greatest intensity around the liver and extending through the diaphragm to the pleura on the right side. On the under surface of the liver were thick layers of lymph. The gall-bladder was contracted and contained no fluid. Near its apex a gall-stone, as large as an ordinary marble, lay half extruded through an opening in its walls. This, which was clearly the origin of the peritonitis, had probably been brought about by localized gangrene or ulceration, from pressure, and an inflammatory condition of the lining membrane of the gall-bladder. (Experiments upon animals and cases of rupture of the gall-bladder in health have shown that normal bile has little, if any, tendency to set up peritonitis.) The history of this case appeals to the profession in a most striking manner for a more careful and thoughtful consideration of two common and generally recognized pathological conditions, viz.: gall-stones and acute peritonitis. Hundreds of men and women (more women than men) are going through life, on the advice of their physicians, suffering more or less from symptoms which can be diagnosed as due to the existence of gall-stones. They are, for the most part, taught to believe that surgical interference for the relief of such conditions is fraught with great danger, and that while life is tolerable operation is not to be recommended. They are advised also (tacitly at least) that, while they may suffer severely at times, or perhaps be more or less incapacitated all the time, the presence of gall-stones does not directly menace life. The foregoing case illustrates one mode in which gall-stones may be the direct cause of death, and probably much more frequently than we have hitherto suspected. Many fatal cases of acute peritonitis, which in the past have been styled "idiopathic," etc., or attributed to "cold," and in which the cavity of the abdomen has not been examined, either before or after death, have probably been due to ulceration or other changes in the gall-bladder or cystic duct, in connection with gall-stones. A case which made a deep impression upon