

seated in the colon, the urine was very abundant. If then we regard this statement of facts merely in a diagnostic point of view, as aiding us in determining the probable seat of obstruction in the alimentary canal, it will not be without its use; for every symptom must now be considered important which can help us to decide a question, the answer to which will go far towards determining the expediency of endeavouring to relieve an insurmountable obstruction by surgical operation."

I am happy to be able to furnish this to the many instances related by Allnat, Vanderpool and others, of the wonderful efficacy of the ox-gall in this form of obstruction. I cannot do better than quote Dr. Clay's remarks upon the *modus operandi* of this valuable agent: He says, "If I were asked how the inspissated gall acts, so as to procure a more soluble state of the fecal mass, I should say distinctly neither as a laxative, purgative, nor drastic, all such producing to a greater or less extent a stimulus to the intestinal coats, exciting them to propel their contents, and to excite an extra secretion from the exhalants.* (The latter action, however, in my mind, is rather questionable.) Such is the generally allowed operation of the various degrees of cathartic medicines, and the common consequence arising from taking such is nausea, sickness, griping pains, &c., more or less, according to the character and dose of the medicine employed. Inspissated gall, on the contrary, produces not the slightest pain or sickness, and yet a motion can with equal or greater certainty be relied upon, and that in a form most easy and natural for propulsion. It is evident its action is not as a cathartic, but as a direct solvent to the accumulated hardened fecal mass, *the consequence of deficiency of quality or quantity of bile in the alimentary canal*; as such its effects may be produced without pain or uneasiness, which would not be the case if its action was on the principle of cathartics, &c."

There is another important point in connection with this agent, which is spoken of by, I think, all who have turned their attention to it. I allude to its power of nullifying the constipating effects of opium. It is abundantly proved in the case before us, where the patient took a grain of opium every fourth hour for nearly three days. I shall conclude by quoting Dr. Allnat's remarks upon this subject. "The constipating effect of opium," he says, "is principally produced by its action upon the liver, the secretion of which it arrests and renders insufficient for the due stimulation of the alimentary canal. In many cases this is a serious drawback to the exhibition of opium, for we often require its sedative, when its constipating effects would be sufficiently injurious to preclude its use. Five or eight grains of inspissated ox-gall will neutralize the effect of a grain of opium, without destroying its sedative efficacy. It also prevents in a great measure its injurious action upon the brain."

* Dr. Addison, some years ago, in the Physical Society of Guy's Hospital, when the subject of constipation was being discussed, remarked that he had in several instances found drastic purgatives perfectly useless, while the frequent exhibition of milder aperients, such as olive oil, was attended with the best results.