

looked for only in the region of the gall-bladder, and the first stages of this disease, when treatment is of so much importance, will be overlooked or mistaken. I have known a patient treated for some months by an intelligent medical man for some spinal mischief, whose acute sufferings from gall-stones in after years an earlier diagnosis would probably have done a good deal to prevent.

One point I have observed: that sometimes during the last minute or two of an attack, when the pain suddenly ceases, and presumably the stone enters the duodenum, there is a peculiar gliding sensation a little to the right of the tenth to twelfth dorsal vertebræ. When biliary colic is due to a stone entering or traversing narrow ducts the pain begins suddenly. The patient may be sleeping soundly, or laughing or talking in happy forgetfulness of all aches and pains; in less than two minutes he is groaning in agony. The greater number of these attacks begin in the night. Kraus found in the course of one year's practice that he was called sixteen times in the day and sixty-two times in the night to relieve patients suffering from acute biliary colic. We attribute the prevalence during the night to the fact that the gall-bladder becomes distended with bile when there is a long interval between meals. The attack may last only a few minutes, and terminate in profuse vomiting. Unhappily, this is rarely the case. With occasional slight intervals due to the entrance of a stone into a wider part of the ducts the attacks generally last from four to twelve hours. I am rather inclined to believe that the pain which continues for days is due to an inflamed or distended gall-bladder, and not to the passage of stones. When a stone becomes impacted in the duct, and jaundice supervenes, there are aches and pains somewhat of a dragging character, but there is not often a continuance of the acute agony which is experienced during its direct passage.

It is by no means easy to describe the pain of an acute attack of biliary colic due to the passage of a gall-stone. Of all the pains which mortal man can suffer this is probably the most severe; women, who have borne children, have told me that the pain of child-birth is by no means so severe as that of gall-stones. A few cases have been reported where death could be attributed to nothing else than the severity of the pain. The patient lies still for a few minutes, then turns on his side, then gets on his knees, throws himself on a sofa, or rolls about on the floor. There is no particular position in which for more than a moment ease can be obtained. Contrary to what one might expect, there is little or no straining of the abdominal muscles.