

parts Dr Molson immediately recognised the discharge as meconium, and, on further examination, discovered the infant had an imperforate anus. The mother having consented to an operation, Dr Molson requested me to take charge of the case. The patient was admitted into my wards at the General Hospital on 19th November, being then three days old, and having since birth passed a large quantity of feculent matter by the penis. The child, which was strong and healthy, had some distention and tenderness of the abdomen, but very slight fulness of the perineum. There was a well-marked median raphé, and a slight puckered depression at the site of the anus. I decided first to try and reach the bowel through the perineum. After placing the child under chloroform, I made a free incision in the median line, dissecting carefully backwards and upwards in the direction of the rectum, and frequently placing my finger in the wound to feel for fulness or fluctuation. I dissected in this way to a depth of fully 2 inches, when discovering a fluctuating tumour, I punctured it with my knife, and was pleased to see quantities of fæces escaping through the wound. I then enlarged the puncture in the bowel, and without much difficulty drew it down to the external wound, and held it there by catgut stitches.

Almost immediately after the operation the mother removed the child from the hospital, and I did not see it again till 9th June 1884. In the meantime Dr Molson had occasionally visited the case, and instructed the mother, in passing bougies, to keep the anus open. The mother, however, did not attend very scrupulously to directions, and after the operation the opening kept gradually growing smaller. When I saw the child last, it was six months old, and was stout and healthy; the opening had contracted so much that it with difficulty admitted a No. 12 catheter. The mother informed me that the child still occasionally passed fæces by the penis, but only when "opening medicine" was given. I intend, when I can get the mother's consent, to incise the opening, and I shall insist on her passing her little finger twice daily through the anus, as Dr Holmes recommends.

I forgot to mention that the child was the subject of another deformity, viz., absence of the metacarpal bone, and probably the