

"Sept. 12th.—Pulse 96. Had vomited once or twice. Vomited material as before. Symptoms more marked, otherwise no change. Large enema brought away faecal matter equal to about one third of normal stool. It was soft and fresh looking, a natural yellow, partly in small elongated pieces, giving one the impression of having passed a narrowed orifice.

"Sept 13th.—Had not vomited during night—Tympanites more marked, otherwise no change. Pain severe in paroxysms, but less severe than at first. (He was getting moph. sulph. gr. $\frac{1}{4}$ to $\frac{3}{8}$ each 24 hours.) Pulse over 100. Tympanites marked. Enema brought away faecal matter equal to $\frac{1}{2}$ or $\frac{3}{4}$ normal stool.

"Evening.—Pulse over 100. Tympanites marked. Enema brought away one apple seed, a few flakes of feculent material. Serious nature of case explained to friends and a consultation suggested.

"Sept. 14th.—Large quantity of stercoraceous material vomited during night. Patient easier; pulse 96; tympanites much less; no result from enema morning or evening.

"Sept. 15th.—Stercoraceous vomiting had continued at somewhat long intervals. Tympanites again increasing, otherwise patient apparently not much worse. No result from enema. Again asked for consultation and those concerned having agreed, sent for Dr. W. E. Jenkins of Lunenburg. We decided that patient's best chance lay in his entering the V. G. Hospital.

History taken from the hospital records. It was written by Mr. Morton, clinical clerk.

"1.—N. E., age 20. Single. Was admitted to the V. G. H. on the evening of Sept. 16th, 1897, suffering from acute intestinal obstruction.

"2.—History of patient.—Patient born in Lunenburg Co. and has always lived in Nova Scotia. Has been going to sea for a few years. Has always been a healthy young man. During last summer has been fishing on the banks of Newfoundland.

"3.—History of present attack.—Last Friday, 10th Sept., patient awoke at 3.30 a. m. with pain in abdomen of an intensely sharp character. Had no appetite in the morning and was unfit for work. Had a slight motion of his bowels. Since then he has passed nothing save a small quantity resulting from enema. He gradually became worse, his pains increasing and his abdomen becoming more distended. Came to hospital on evening of the 16th. Conveyed from wharf in ambulance. Had been vomiting stercoraceous matter for three or four days, which was still.