most trustworthy sign of the presence of muco-membranous colitis.

In his paper, read before the Congress, after describing how the bowel can be felt to harden under the hand so that it can be grasped between the fingers, and "just as a floating kidney can," he goes on to say that "when the calibre of the bowel is increased, it may be to a considerable extent, we have before us an "active distension," which simulates a solid tumor by its hardness and its resistance." If this hardening of the colon be carefully and patiently felt for, it will be found to be a most reliable sign of the presence of colon catarrh. Sometimes it is most marked in the cecum or ascending colon, and sometimes in the transverse colon, sometimes in the sigmoid flexure or descending colon.

Out of the thirty or more cases which I have seen in the last four years, I have found this muscular hardening more frequently in the cecum than elsewhere in the colon, but it is also common in the region of the sigmoid flexure. It is this type of hardening of the portion of the cecum nearest to the appendix which gives rise to the tumor which is so characteristic of appendicitis, and it is often not easy to distinguish the primary hardening of the cecum due to colon catarrh from the secondary hardening which results from appendicitis (see diagnosis).

Another way in which the abnormal irritability of the muscular coat shows itself, is by spasmodic contractions, which may occur in any part of the colon. While undergoing such contraction, the bowel can be felt as a hard and often tender cord, some one-half to three-quarters of an inch in diameter. This is simply an exaggeration of the normal state of tonic contraction, which renders the healthy colon palpable in the right or left iliac fossæ.

Thirdly, there may be irregular spasmodic contractions, giving rise to the colicky pains which are so frequent a feature of this complaint. These painful contractions are in all probability often due to the efforts of the bowel to get rid of the masses of hardened and altered mucus clinging to its interior. At all events, they often precede the expulsion of the so-called membranes.

CONSTIPATION.

3. The third primary symptom is constipation. This is a most characteristic symptom, and one which gives much trouble to both patient and doctor. But, although extremely common, it is not invariable, and occasionally diarrhea is said to be present