THE AESTHETICS OF MEDICINE.*

BY

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It is curious to note how short-lived the memory of some evil things may be. When we suffer bereavement, time softens our sorrows and we come to look back with equanimity upon the anguish which we suffered at the time of disease or disaster and death, and only the happy memories associated with life remain. In the case of nations which have been at war the tragedies and calamities and anxieties incidental to the period of hostility after a time become mere matters of talk. The sense of reality which surrounded them at the time of their occurrence is lost and they are looked back upon without emotion. As in the case of all friendships which have been seriously broken and patched up again, scars of mistrust and of enmity remain on either side, and it is doubtful whether they can be effaced, at all events in the lifetime of a generation. Fortunately, however, these scars are not necessarily transmitted to the descendants of the previously hostile races; just as the children of disfigured parents are born without blemish, the old animosities become smoothed away and, an *entente cordiale* being established, nations which were formerly enemies may become fast friends. It is common knowledge that the lessons of a war are soon forgotten, all the enthusiasm which existed at the time of the war about having territorial regiments up to strength disappears, and instead of having to reject men because there is no room for them—the young manhood of the country lapses into its old condition of indifference and carelessness, and all kinds of schemes and projects have to be formulated and employed to encourage recruiting and to impress the necessity for training and readiness in case of emergency. Just as in the case of a war, the memory of a scourge which, passing over a country, kills thousands of people, soon goes; a decade passes, and the remembrances of the sore experiences become softened, and people having resumed their normal cheerfulness and optimism, think, if they do not say, "Sufficient unto the day is the evil thereof." A generation passes, and the new one regards the story of woe as a matter of historic interest, worrying no doubt to their ancestors, but why trouble about a set of people whom they only knew by hearsay, or about a disease which is little likely to become epidemic again in view of all the precautions which the health authorities undertake to keep it in check? A nation's gratitude is often periodically revived by the celebration of the anniversaries of great historic battles and military events—for instance, by the keeping of Trafalgar days and Ladysmith days, and by the decoration of the statues of heroes and of regimental memorials, but I wonder how many people ever dream of what they owe to medicine, to the great generals who have come out victorious in the battles against disease and against the scourges to which I have referred. We never hear of any national or international rejoicings to celebrate the victories of men like Jenner and Lister, or of the numerous lesser lights, who have done more for this country and for humanity in general, and have covered themselves with more glory and honour than could have been attained by the carrying out of any great military operations. The one type of glory is always associated with destruction of life and health and with misery, privation, and international jealousy; the other is inseparable from what is universally benign and from factors which have to do with the salvation of life and health, and they are also inseparable from those bearing upon the subject which more immediately interests me at the moment, namely, the preservation of physical good looks and beauty. Just as disease has a destroying effect upon beauty, so medicine has exerted its influences in the way of its preservation. Deformity, using the word in its broadest sense, is almost invariably the result of disease, and when a person is deformed, whether in mind, feature, body or limb, his or her chances in life are lessened, sometimes on grounds of diminished physical

utility, but not infrequently simply because beauty is an important asset, the admiration and appreciation of the beautiful being an inborn attribute of humanity. Medicine has done a great deal in the past to preserve good looks. Nowadays, for instance, we regard with some curiosity the face of a man or woman which is pitted by small-pox, and we truthfully ascribe it to some careless or foolish neglect of vaccination. Some of us, however, remember the time when a large proportion of the older people whom we knew in the days of our childhood were more or less scarred by that disease—those who were children in the early vaccination or prevaccination days, and who had run the gauntlet of the small-pox in their childhood. Everybody had to run the risk of it then, just as the children of to-day almost invariably get measles. After the Vaccination Acts small-pox became rare among children, and the scarred faces were mainly seen among the adults who had had it in the prevaccination days. That generation having passed away, their protected children grew up and took their places with unblemished faces, and we, the great-grandchildren of that scarred and pitted ancestry, are hardly able to realize the state of affairs which existed in the former days. The whole human world owes much of its retained facial beauty to Jenner, and we little appreciate to-day the number of people whose features have been saved and their good looks preserved through vaccination.

Disease has always taken an important place in history, fiction, philosophy, and poetry, and it is not surprising that the small-pox which raged periodically in the country should have figured largely in these branches. It was a factor which entered into everybody's calculations, because it spared no class of society, and was an important cause of death as well as of deformity. It was sometimes spoken of as a murderous disease. You will recollect that Mary, the wife of William of Orange, succumbed to it, and its importance on account of its fatality may be estimated by the fact that in comparatively recent times nobody would have been accepted for life insurance who had not either had the small-pox or been vaccinated, and to-day every insurance inquiry form requires information on this point.

We have an example of its introduction into fiction in Esther's narrative in *Bleak House*, where Dickens so graphically describes Esther's recovery from small-pox—her gradual restoration to health and the returning sight and strength; then the pathetic recognition that the room had been changed; the looking-glass gone; how Charley, when Esther asked about it, "making as if she had forgotten something, went into the next room and was heard to sob there." Then the bravery of Esther when she realized that her beauty had gone for ever, and that the course of her life was thereby possibly changed for ever.

This change from beauty has been the almost invariable theme of the novelist and of the philosopher in connexion with small-pox; the latter, at all events, has made it the circumstance whereby some finer qualities of mind were eventually developed or brought out. This is exemplified in the "Consolation Offered to a Beauty Destroyed by the Small-pox," written by Steele in the *Spectator* dated Wednesday, February 20th, 1711—just over two hundred years ago. Parthenissa has written a letter in which she says "This face which (according to many epistles which I have by me) was the seat of all that was beautiful in woman, is now disfigured with scars." Steele first of all reproves her for having thought so much of her beauty, and then proceeds to comfort her by saying that beauties generally speaking are the most impertinent and disagreeable of women. He says:

Ask any of the husbands of great beauties, and they will tell you that they hate their wives nine hours out of every day they pass together. . . . They pray at public devotions as they are beauties—they converse on ordinary occasions as they are beauties. Ask Belinda what it is o'clock, and she is at a stand whether so great a beauty should answer you. In a word, I think, instead of offering to administer consolation to Parthenissa, I should congratulate her on her metamorphosis; and, however she may think she was not the least insolent in the prosperity of her charms, she was enough so to find she may make herself a much more agreeable person in her present adversity. . . . Good nature will always supply the absence of beauty, but beauty cannot long supply the absence of good nature.

Steele's consolation was very well in its way for one

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who, having possessed beauty, had lost it, but I am sure that all will agree that beauty and insolence are not so inseparable, and that good qualities are sufficiently often associated with goodly appearances to make their retention well worth while. I doubt very much whether loss of beauty would always have the effect of removing or abating disagreeable points in character; indeed, it is probable that it might sour the temper. It is proverbial, for instance, that the hunchback tends to be an ill-tempered and disagreeable type of person.

So much for the small-pox. Let us be thankful that it no longer disfigures us as a nation, and let us pray and hope that no foolhardy measures will ever make it optional whether our children be protected from it or not. There is no greater danger to the people than the anti-vaccination agitator, for we owe it to our children that their good looks as well as their lives be preserved, even if the law insists upon it.

Apart altogether from epidemic diseases such as the one just referred to, there are a large number of other conditions which affect the child and lead to lasting structural defects of one kind or another. These, if they do not give rise to actual physical deformity, occasion more or less chronic ill health which, in itself, detracts from what would have been normal physical and mental character. Beauty is a corollary of health, and health is the expression of physiological perfection and fitness. During the past thirty years public opinion has undergone a most extraordinary change with reference to the importance which is to be attached to the proper care of the child. The time was when the young and inexperienced doctor was thought to be good enough to look after the children of a household, and they were also sent to less expensive dentists than those employed for the grown-ups. By degrees it has become realized that many of the chronic troubles of men and women—indeed, one may say a great deal of their lack of capacity for undertaking the duties of life—have resulted from ignorance concerning the care which might have been accorded to them during their childhood. It was an appreciation of this fact among others which led to the establishment of the Royal Liverpool Country Hospital for Children, which has done and is doing so much to grapple with those troubles which give rise to permanent crippling and ill health, and the same principle has, no doubt, led to the establishment of all of those school clinics and medical inspections which are becoming an essential part of the administration of every child's life. Every one will agree that a person who is normally good looking, whether child or adult, loses his or her attractiveness when the normal curves and lines of beauty are disturbed by disease. I shall presently refer to some of the ways in which nutritional disturbances and the misuse or disuse of physiological function give rise to changes which detract from beauty; but, in addition to these, there are a large number of ailments more especially affecting children which not only immediately influence their appearances but give rise to lasting defects and deformities. Apart altogether from its aesthetic aspects, there are in this connexion few questions in social economics which are more worthy of attention than the care and treatment of the child. If taken early enough, its disease may be arrested before much damage has been effected; and, on the other hand, even if organic changes have taken place, by suitable treatment crippling and deformity may be minimized, and the less the amount of crippling the greater will be the wage-earning capacity of the future man or woman, and the less will he or she be likely to drift into the workhouse, or to become indigent and dependent upon charity. On this account, if for no other reason, the subject is important. At the moment, however, I cannot deal with this aspect of the question, my purpose being simply to speak of the influences which have to do with the preservation of beauty.

Civilization is a factor which is no doubt responsible for some of the defects and deformities to which I shall presently refer. In the lower animals instinct forms a guide which leads them to functionate naturally, but in our case instinct has been lost, and our methods of bringing up the child are so artificial that structural changes take place simply from want of proper regard for the carrying out of physiological principles. Nature, while resenting overwork, requires, nevertheless, the

exercise of function for the maintenance of physiological soundness, and habitual desuetude engenders atrophy, and atrophy may in its turn lead to loss of vitality and consequent disease.

For many years I have been interested in the condition of the teeth of children, and there is no part of the body to which the above statements are more apposite, and since the teeth are so essential to goodly appearance and to the well-being of the individual, I propose to say a few words concerning them.

When visiting the museum of the Royal College of Surgeons in London a year ago, I was privileged to attend a demonstration by Professor Keith, who, among other things, showed us the celebrated Gibraltar skull, which is said to be 500,000 years old. One of the points which struck me concerning it was the regularity of the teeth and the straightness with which they were set up in the jaws. This is a characteristic which is noticeable in most of the skulls of primitive people whether they be those of children or of adults, and if we examine the teeth of the uncivilized races of to-day, those who live on more or less primitive lines, we find that the same principle holds good—namely, that they have good and regular teeth just as in the case of the lower animals whose teeth so comparatively seldom depart from the normal. They are squarely set in the jaws, the molars meeting crown to crown and articulating well when the jaws are closed. How does this compare with what we find in our modern civilization? Why, in nearly every child which has completed its second dentition we find that the molars, and especially the lower ones, have tumbled in towards the middle line, so that when the jaws are closed the outer edges of the crowns alone come in contact and the grinding surfaces never come near each other. It is not uncommon to find this deformity so excessive that the crowns of the upper teeth actually overlap and articulate with the outer surfaces of the lower ones, in which event decay is nearly always very marked.

I will guarantee that nine out of every ten children whom we examine present this deformity to a greater or less extent, and in many cases the incisors are similarly affected. Professor Keith has been kind enough to confirm what I have said as to the regularity and straightness of the teeth in the Gibraltar skull, and he has also informed me that this "edge to edge" or "overlapping bite . . . only became common some centuries after the arrival of the Anglo-Saxons." Associated with this deformity in the teeth is a loss of vitality in them and the consequent infective necrosis which so often begins in the six-year-old molar and then spreads to other teeth. When a person has a beautiful set of teeth free from decay, you will nearly always find that they are squarely set and with regularly opposing crowns. In old people who have retained their teeth this characteristic is almost invariably present; for instance, in an old lady of my acquaintance aged 94 who has never lost a tooth in her life, every upper molar articulates perfectly with its opposing fellow, and the axes of the teeth are quite perpendicular. Now, what is the meaning of this deformity? It is not due to rickets—of this I am satisfied because I have so often seen it in children who have never had a sign of that disease. It does not generally occur in the milk teeth, which are often quite good and regular as compared with the permanent ones which succeed them, and it would, therefore, seem to have something to do with the permanent ones or with the alveolar structures in which they grow during their period of development. Desuetude, atrophy, deformity, decay; that is the order of events, and why does it occur so commonly in the civilized child? Simply, I believe, because we do not give its grinders anything to do. Endless trouble is taken to educate mothers and those having the care of infants as to how babies should be fed. Our corporations introduce milk dispensaries, and there are other private philanthropies which take pains to teach mothers all about the feeding of their infants in such a way as not to violate physiological principles, and during the period of infancy, if these instructions are carried out, we get corresponding health, peace, and quietness. Then comes the period of early childhood, and we straightway forget that there are principles equally important to be observed then. A perverted instinct leads us in our mistaken kindness to forget the necessity for the exercise of physiological function, and we provide the child with every description

of softened starch, ground-up oatmeal, and other easily swallowed products (many of them even patented as being easily taken by a child) which go down with a gulp. We are under the impression, perhaps, that they are rendered more digestible by the softening process; the teeth are saved all trouble, no mastication is required of them, and correspondingly little salivation takes place, which incidentally accounts in a measure for the common amyloid dyspepsias of children. What wonder is there that the jaws atrophy and that the coming and developing teeth, which are no doubt influenced by the treatment accorded to their predecessors, as well as that to which they are themselves subjected, atrophy from disuse, topple over, and become easy victims to caries? Thus it will be observed that I associate this dental deformity and subsequent decay, and the starch indigestions, too, which are so common during childhood, with lack of function, and would advocate for its prevention the use of starchy foods which require to be thoroughly chewed and masticated if we are to preserve the teeth in a condition of beauty and soundness. These observations are not based upon mere theoretical grounds, but upon lessons learnt in connexion with inspections of industrial and reformatory schools which I have carried out from time to time. It is a notable circumstance that on the school ships, where the boys are fed upon the traditional ship's biscuits, this type of deformity is not nearly so prevalent as it is among children of the shore schools who are fed on soft starches. For many years, at one of the latter institutions, by my advice, the boys have had these biscuits added to their rations, and there is not the slightest doubt that both the tooth troubles and the dyspepsias have diminished; and, furthermore, there seems to be some evidence that dental deformities which had already taken place have to some extent become corrected since the harder food has been given. I am quite enthusiastic as to this (in my opinion) essential factor in the feeding of children, if we are to preserve their teeth and their digestions.

This desuetude is not the only predisposing factor which has to do with the destruction of dental beauty, but it is one with which we are capable of dealing; and if people would only observe the necessity for exercising this common physiological function of the teeth, I feel convinced that not only the present health of the child would be preserved, but that many of those later troubles which are now known to result from dental caries, especially with reference to the digestive functions, might be prevented or mitigated.

Any nutritive disturbances in early childhood will interfere with the regular formation of the teeth, and will cause them to have a deficiency of enamel with thinning of the dentine. The bases of the teeth near to the gums may in such a case be thick and covered with enamel, whereas their bodies are thinned, discoloured, and deeply striated in a longitudinal direction with thickened transverse ridges, giving a very unwholesome and anything but beautiful appearance, more especially to the incisors. This type of trouble is often seen in cases of backward development or where there are congenital arrests of development, such as congenital heart disease, but they may also result from any prolonged illness, and even acute diseases such as pneumonia cause minor dental deformities. It is difficult to deal with this kind of trouble, but the possibility of an interference with the beauty of the teeth should act as an incentive to all parties concerned to shorten the course of chronic disease in early childhood with a view to the preservation of future good looks.

Endless trouble is taken by parents to avoid facial blemishes in their children, and medical men will adopt every measure to avoid operations on the face and neck which may leave ugly scars and marks; but we seldom regard constitutional disease in the young child from an aesthetic point of view, or think about the effects it may have upon its appearance in later life. In a disease like rickets, which causes immediate bony deformities of the limbs, the matter may be considered, but I doubt whether the remote effects are greatly thought about. Just think of the damage done to the features by this disease; how it deforms the brow and beaks the jaws, causing lasting changes in these visible parts, not to speak of the stunting of growth and other nutritional disturbances in the bones and muscles which it occasions. The lesson to be derived

from all of these troubles is that not nearly enough attention is directed towards the education of mothers as to how their children should be fed and dealt with after as well as during the period of infancy. A war should be waged against rickets and against all the faults in hygiene to which I have referred, not only on account of their immediate effects, but also because they are destroyers of the beauty of our childhood and of that of the after manhood and womanhood.

While thus advocating a careful education concerning diet and hygiene with reference to their importance in maintaining normal structure, it is just a question whether in some respects we do not overdo the hunting out of congenital defects some of which might with advantage be left alone if we regard them from an aesthetic point of view. I was present at a meeting last winter at which a large number of girls from 8 to 17 years of age were present and took part in some drill and other kindred displays. I could not help wondering whether all of the large proportion of them which wore spectacles really required them. I confess that I dislike to see children in spectacles and would personally prefer that they should tolerate some of the minor degrees of ocular defect, providing they cause no inconvenience, rather than have their faces disfigured with glasses, and it is not only the face but the whole attitude of the child which becomes altered by them. It walks differently and it runs differently when it wears these correctors of visual defect. I imagine that some of the deformities of the eye may be something like those of the feet inasmuch that every case may not need active attention. I regard with remorse the number of useful men and boys who are kept out of the services on account of flat feet, for instance, which is in many cases static and harmless, but which through being a technical flaw disqualifies the candidates. My experience of Volunteer and Territorial work has taught me this lesson, for one knows of plenty of men whose feet were flat as flat could be who have done long and trying marches without experiencing any inconvenience. So, with the eye, there are surely physiological or anatomical defects which cause little trouble and are compensated for by nature. I would go so far as to say that there are certain types of short-sightedness which rather add to the attractiveness of a girl, and if they cause no practical inconvenience or nervous disturbances, why interfere with them, and by mounting her in spectacles constitute a life-long disfigurement? On this account, I do hope that the enthusiasm of the school medical officers will not lead them to attempt to deal with every case which does not come up to a standard of visual perfection.

During a meeting of the workers of the Invalid Children's Association in Liverpool a number of the members visited the Royal Liverpool Country Hospital for Children at Heswall, an institution in which the patients are treated entirely in the open air. A lady whom I was taking round the wards exclaimed, "What handsome children you have in this part of the world!" and these children, although they are all of them suffering from diseases of one kind or another, certainly do look handsome, but this is not because they are more beautiful than other children; it is simply due to the fact that they are living in conditions which tend to bring out their good looks. The beauty of the child depends, like many other things appertaining to it, upon its environment. It fades when in unwholesome surroundings, where worry, improper feeding, unrest, and uncleanness influence it on the one hand, and the unrefining influences of clamour, filth and degrading language, drunkenness and vice, exist on the other hand. I do not say that these conditions prevail in every case, but every sick child which is in poor circumstances is in an environment of unrest, using that term in a broad sense, which tells upon its nutrition and upon its nervous system, and the secret of the good looks of the children to which this lady referred is the fact that in the hospital these conditions of unrest are absent, and that the nutritional conditions are at their highest; the sunlight and the constant fresh air stimulate metabolism, with the result that they put on weight in an extraordinary way, the normal curves of beauty take the place of pinched and hard lines and of the bony prominences and angles which exist in any condition of wasting; the proportions which the various parts of the body normally bear to one another, so essential to grace

and perfection of conformity, become restored, with the result that many a child which appears to be plain when it comes to the hospital becomes positively good-looking in a very short time. Any painful disease or any condition of chronic disease alters the features perhaps permanently, and so do any conditions which cause irritability of temper, in itself a common enough symptom of disease, and the handsomeness of the children which was noted simply depended upon the fact that with improved health comes grace of posture and of action and of movement; beauty of expression and of colour; brightness of the eyes and alertness of mind—all characteristics of a well-conditioned and attractive child.

As I have already said, beauty is a corollary of health, and the restoration to health with the minimum amount of crippling or deformity—whether it be of lung, heart, abdominal organ, or of the limbs—involves an economy not only respecting the future wage-earning capacity of the individual, but it also enhances his chances of obtaining, as well as of retaining work. On this account, the early recognition and treatment of disease means not only a great advantage to the patients inasmuch that they recover with less detriment to their appearances and capabilities, but also to the public, who provide the funds for maintaining the hospitals, and to the associations and institutions which undertake the care of invalid children, because, by getting the cases early the periods of treatment can often be shortened and the amount of expense in any given case is consequently lessened; last, but not least, it is an advantage to the taxpayer, who will certainly have to look after the child when it grows up if it is badly damaged. When the advanced cases present themselves, of course we have to look after them just as carefully, but they take longer to mend and the amount of deformity and of crippling which they sustain is likely to be correspondingly marked. Never, therefore, should we pass lightly over the case of a child which is showing early signs of invalidism, or because it does not appear to be seriously ill. If we could only get hold of these cases early and train such organizations as the Invalid Children's Associations to recognize them, and by bringing them under suitable treatment prevent the advance of their disorders, we might save an immense amount of suffering and of anxiety and of money, too, not to speak of the preservation of goodly appearance, which is such a valuable asset to the individual mainly concerned.

Much experience has now been gained by the treatment of diseased children in open-air wards, and there is not the slightest doubt that the processes of repair are greatly aided by the therapeutic influence of fresh air which is one of the most powerful allies of the doctor. It is remarkable that, like the processes of repair, those of growth are correspondingly stimulated by it. The cellular environment (which I have referred to in another paper) is improved, with the result that children who have been backward brighten up, and their mental activities improve *pari passu* with the restoration of their bodies. This fact indicates that it is not only the diseased child who should have this kind of treatment in the open air. There are thousands of children whose cellular environment is indifferent. The vitality of their cells is consequently lowered, and they are on the verge of disease. Advantage should be taken of these open-air methods of raising the cellular vitality and resistance for all of these. Every school should be a sanatorium, or, using the word in its proper sense, a preventorium, and with proper appliances such open-air class-rooms could be used both summer and winter with great advantage to the children both physically and mentally. At one of the industrial schools in Liverpool this system has, by my desire, been experimented with, and the teachers themselves have become convinced of the benefits which accrue from taking the children out of the closed schoolroom.

Do not let us regard the actually diseased child as the only one who is to reap the benefit of this beneficent measure. Liverpool has pioneered the method of treating diseased children in the splendid open-air hospital at Heswall, and it is earnestly to be hoped that other towns will follow her example, and that the principle of giving healthy children, and especially the indifferently healthy ones, the advantages of open-air education will become generally accepted. The results will manifest themselves not only in the improvement and maintenance of their

healths and sharpening of their wits, but it will also be found that the spread of tuberculosis and of infectious diseases will be minimized, so that as a preventive measure it is to be recommended, if for no other reason.

The idea of open-air schools comes in very timely association with the improved sanitary conditions which have been carried out by our health authorities with reference to insanitary dwellings, and in connexion with it should come a vigorous educational campaign having for its object the teaching of the people that open air is as necessary for the child at home as it is elsewhere. The child is the most valuable possession of the nation. Much money is expended upon it, which is wasted if it becomes diseased or crippled, or if it dies, as so often happens just at the period when childhood terminates. Its educational birthright is recognized and provided for; but that equal claim which it has—to be brought up decently, to be protected from disease and deformity, and taught how to protect itself in the future, also needs to be regarded; and the factors which influence the cellular environment, of which fresh air is one of prime importance, must be remembered and duly utilized.

In conclusion, let me once more direct attention to the fact that beauty is a corollary of health, and just as the wiping out of small-pox has done so much to preserve the beauty of the race, in like manner attention to the treatment of those diseases which tend to promote permanent organic changes and deformities and crippings, added to appropriate measures being taken for their prevention, will do much to further this aesthetic aspect of the work of the medical man, and of the work of those organizations which are doing such magnificent service in the way of helping suffering childhood.

HENOCH'S PURPURA WITH INTUSSUSCEPTION: LAPAROTOMY: RECOVERY.

BY

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THE occasional complication of a case of Henoch's purpura by the occurrence of an intussusception has been recognized for some years, yet the cases are of sufficient rarity to make the following worthy of record:

The patient, a boy aged 4, was brought to the out-patient department of the General Hospital by his mother; she stated that he had always been rather a delicate child with a poor appetite, and that for the last twelve months he had suffered from stomach-ache and frequent attacks of sickness. Three weeks before admission the attacks of abdominal pain and sickness became more noticeable, and were accompanied by a rash which appeared on the buttocks, and then spread to the limbs; the rash at first was definitely urticarial, the spots being raised above the surface and about the size of a shilling; these spots soon became haemorrhagic. On one occasion the mother noticed a small amount of blood in the motion. The rash faded, but fresh crops came out of a similar nature, the spots, however, being smaller. The child gradually improved, but at the end of three weeks, on the evening before admission, he had a sudden violent attack of abdominal pain, worse than anything he had ever experienced previously; he was sick, and almost immediately dark fluid blood was passed from the bowel. These symptoms of violent pain, sickness, and haemorrhage from the bowel continued intermittently throughout the night; but abated somewhat on the morning of admission. He was seen by his doctor six hours after the attack had started; examination of the abdomen, on the suspicion of an intussusception being present, failed to reveal a tumour.

On admission, twenty hours after the onset of pain, the child was pale and quiet, pulse 128, temperature normal; the belly was soft, and an irregular trilobed tumour could be felt lying somewhat transversely in the epigastrium, and apparently somewhat movable on respiration. Per rectum nothing could be felt; dark fluid blood, however, escaped on removing the finger from the bowel. The urine contained a light cloud of albumen, but gave no reaction to guaiacum. On the knees and ankles, and on the forearms, especially in the neighbourhood of the elbows, there was a slightly raised papular rash, some of the papules showing old haemorrhage.

Operation Immediately after Admission.

A median incision above the umbilicus revealed a large dark tumour lying more or less transversely across the abdomen; owing to the force with which the invaginated bowel had been thrust into the lumen of the colon, the latter had become bent on itself, giving the trilobed appearance which had been noticed on examination. The tumour was about 10 in. in length, and