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INTESTINAL OBSTRUCTION

By H. W. CARSON, F.R.C.S.

*Senior Surgeon, Prince of Wales's General Hospital,
London.*

Delivered to Rugby Medical Society, October 1, 1927.

I HAVE been asked to open a discussion on "Intestinal Obstruction," and in doing so I feel that the simplest way to approach so complicated a subject is to lay before you my own difficulties, in the hope that I may find that they are your difficulties also, and a free discussion may help in their solution. I think it will be agreed that of late years little progress has been made, as far at any rate as the saving of life is concerned, in the treatment of these cases, except in external hernia and intussusception, and we still find

a mortality of anything from 40 per cent. to 50 per cent. among obstructions from any cause but these two. The improvement in the strangulated hernia statistics is due to earlier diagnosis and perhaps to the fact that strangulated hernia is now relatively uncommon, although it still accounts for more obstruction than all the other causes put together, while intussusception has a better prognosis because it is easily diagnosed, and surgical treatment is now universally adopted.

SMALL INTESTINAL OBSTRUCTION. DIAGNOSIS.

Although it may be more important to realize that an acute abdominal emergency is present, rather than to make an exact diagnosis, certain facts are at once apparent:—