

The large intestine passes into the upper right-hand corner of the abdomen, where it comes into contact with the liver. It then runs upwards and to the left to the upper left-hand corner of the abdomen, where it comes into relation with the spleen. It is connected with the stomach, through which much of its weight is transmitted. From this it runs down to the left groin, and from there to its termination, where it forms the rectum.

Trouble first arises through the cæcum or commencement of the cess-pool of the tract tending to fall into the pelvis and to interfere there with the functioning of the rectum, uterus, or bladder.

Nature attempts to obviate this by an evolutionary process, new bands being formed which grip the cæcum and the end of the small intestine. The appendix is very liable to be caught up by one of these bands or grips.

If the appendix, which is a hollow tube, is anchored at a point in its length it is very liable to be kinked by strain exerted by a loaded cæcum, and the tube beyond the kink becomes inflamed by its distension with its secretion.

This forms the several types of so-called appendicitis, which is nothing other than excessive zeal combined with a marked want of discretion on the part of the organism.

Very often the appendix is so anchored that it interferes with the passage of the contents of the small into the large intestine.

Again Nature attempts to prevent the fall of the cæcum by fixing the end of the small intestine by a band, and this band, useful for a time, later kinks and obstructs the small intestine and interferes most materially with the drainage at this point.

The result of this obstruction to the discharge of the intestinal contents is most serious and far-reaching.

Material is dammed back in the small intestine, and changes of a bacterial and fermentative character occur. The level of organisms or of material which has undergone an excessive decomposition is raised and gases are produced which cause great distress or pain to the unfortunate sufferer. The pull exerted by the distended small intestines obstructs the end of the duodenum by kinking abruptly. Consequently, material cannot escape from the duodenum, and it distends, dilates, inflames and ulcerates. The stomach cannot evacuate its contents also, and it distends, inflames, ulcerates, and later becomes cancerous.

The duodenum becomes infected by the organisms banked up in the small intestines,

and they infect the ducts of the liver and pancreas. In consequence, gall stones, jaundice, inflammation and cancer of the liver and its ducts arise. The same happens in the case of the pancreas.

As the contents of the large intestine progress along this portion of the bowel they become harder and are more readily obstructed by any dropping of this bowel into the pelvis, because it makes it difficult for the material to pass any normal or abnormal kink. Pain and discomfort result, and the mucous membrane becomes inflamed and irritated; varieties of so-called colitis result in consequence, and ulceration or cancer develops where there is most irritation. Much of this obstruction may be guessed at or diagnosed by examination of the abdomen. It can, however, be determined with additional accuracy by the examination, by means of the X-rays, of a meal of bismuth carbonate. This can be observed in its transit through the drainage scheme, and any obstacle to its transmission can be carefully studied and observed.

This means of determining the working of our drainage normally and abnormally is of the greatest importance to us.

I will show you later some photographs, which have been lent me by Dr. Jordan, of cases which he has observed, and which show several of the defects referred to, which will give you a better idea than my mere verbal description.

If the contents of the gastro-intestinal tract are delayed for an abnormal time in any portion of the canal, changes take place in them and a quantity of poisonous products are produced. These are absorbed into the circulation in an amount greater than can be dealt with by the liver. In consequence they get into the circulation and produce poisonous effects. These effects are exerted on the channels that carry them and upon the organs that excrete them, determining degenerative changes in the heart, the coats of the blood vessels, and disease of the kidneys and other excretory organs.

The liver itself gets exhausted, after a time, with the progressively increasing strain thrown upon it, and itself shows degenerative changes called diseases. When the liver fails to perform its function, the amount of poison that escapes into the circulation unchanged steadily increases with disastrous results to the sufferer.

These toxins also poison the several tissues of the body.

*(To be concluded.)*

[previous page](#)

[next page](#)