

apparatus can be introduced through the anus and through the lumen of the sigmoid colon and ileum from the abdominal cavity. All these patients feel well. They defaecate two to four times a day as before the operation. On radiological examination after operation motor function was normal and narrowing of the anastomosis was not observed (Fig. 4).

With the help of this apparatus anastomosis in the depth of the pelvic cavity becomes easier, and the intestinal wall can be divided much lower than the cancer, thus extending the indications for resection of the rectum but preserving the sphincter. The duration of the operation is shorter and it causes less trauma.

#### CONCLUSIONS

With apparatus KC-28 colo-rectal and ileorectal anastomoses can be made successfully. This apparatus shortens low anterior resection of the rectum by 20 to 25 minutes. With the apparatus the operation can be used when the tumour is 7 cm. from the anus in women and 8 to 9 cm. in men.

#### REFERENCES

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#### CORRECTION

In figures 1 and 2 in the paper by Vibeke Binder and Eigill Hvidberg, entitled 'Histamine content of rectal mucosa in ulcerative colitis' (*Gut*, 1967, 7, 24) these are two misprints. In Figure 1 the mean value for the histamine content in moderate ulcerative colitis should read 79.1; in Fig. 2 the mean value in control subjects should read 71.4.