

Chullin – Simanim

פרק ג – אלו טרפות

Daf 48 – מח

1. A lung which was stuck to the chest wall ("סירכא") – whether there is a concern for a puncture

Rav Nachman said: ריאה הסמוכה לדופן – if a lung was attached to the chest wall, אין חוששין לה – we are not concerned [that the lung was punctured] and the leaking fluids caused the adhesion, rather, we assume the chest wall was punctured. העלתה צמחים – If blisters developed at the adhesion, we are concerned the lung was punctured. Avimi said that in both cases, we suspect that the lung was punctured. Rava reported how to determine the puncture's location: we separate the lung from the wall with a thin knife; if there is a ריעותא – defect in the wall, we attribute the adhesion to a puncture in the wall, and the animal is kosher. If not, the lung may be punctured. Rebbe Nechemiah *brei d'Rav Yosef* would examine the lung by placing it inflated into lukewarm water (Rashi says he was acting stringently where a defect was found in the chest wall). Others say this examination was performed regarding Rava's ruling: הני תרתי אוני דריאה דסריכן להדדי – if these two non-adjacent lobes of the lung were attached, לית להו בדיקותא לאנשורי – they do not have an examination which can permit the animal, and it is a *tereifah*. According to this version, Rebbe Nechemiah would permit it after examining it in water. However, this version is refuted.

2. When the chest wall can seal a hole in the lung

Rav Nachman ruled that if צמחים – blisters developed at an adhesion between a lung and the chest wall, we are concerned the lung was punctured and it is a *tereifah*. The Gemara objects that Rav Nachman said: ריאה שנקבה ודופן – if a lung was punctured and the chest wall seals [the hole], it is kosher. Why, then, would he rule that a lung which is attached to the wall is a *tereifah* where it appears the lung was punctured, since it is sealed by the chest wall? The Gemara answers: התם במקום רבייתא – there, the chest wall can seal a punctured lung where it adhered to the wall in the place of growth, i.e., where the lung naturally lies against the wall, so the seal will likely remain. When the adhesion is not in a place where the lung is naturally against the chest wall, the seal will not remain effective. The "place of growth" is defined as חיתוכי דאוני – at the separation of the lobes. Ravina qualified where the chest wall can be an effective seal for the lung: והוא דסביך בבשרא – it is only where [the seal] is enmeshed within the meat between the ribs.

3. מחט שנמצאת בריאה

Amoraim discuss: מחט שנמצאת בריאה – if a needle was found in the lung, and there is no discernible hole, some Amoraim ruled it kosher, while others ruled it *tereifah*. The Gemara first suggests that they argue if חסרון מבפנים – an internal deficiency is considered a deficiency, because the metal needle eventually eats away at some of the internal lung tissue. However, the Gemara concludes that all agree that a חסרון מבפנים is not considered a deficiency, and their dispute is about a different question: the lenient opinion holds that [since there is no discernible hole], we assume סמפונא נקט ואתאי – [the needle] entered through the vessels [of the lung] after going down the trachea, without puncturing the lung. The stringent opinion assumes that נקובי נקיב ואתאי – it came by puncturing the digestive tract and lung after being swallowed through the esophagus. Although Rav Nachman ruled that סמפונא דריאה דאינקיב – if a bronchial tube of the lung was punctured, it is a *tereifah*, and this needle must have punctured a bronchial tube to reach the lung tissue, that is only where it was punctured against the adjacent tube, but a puncture elsewhere is sealed by the lung tissue.

Siman – Brainiacs

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3 things to remember

1. A lung which was stuck to the chest wall ("סירכה") – whether there is a concern for a puncture
2. When the chest wall can seal a hole in the lung
3. מחט שנמצאת בריאה

