in connection with the colon or cacum. The case was desperate, and clearly hopeless unless the toxic focus could be removed. Operation was therefore decided upon. The patient was prepared by evacuating the bowels and restricting the diet to a moderate quantity of milk for twenty-four hours before operation.

On the 4th of October, assisted by Dr. Roddick, I exposed the tumor by a vertical incision directly over it and about an inch to the right of the rectus muscle. It was at once evident that it was a kidney tumor. An aspirating needle was introduced, but withdrew only a little blood and permitted the escape of a distinctly fæcal odor. Before proceeding further the left kidney was felt by the hand of the operator within the peritoneal cavity and found to be normal. The peritoneum (posteriorly) was then incised and the colon displaced upwards. The tumor was covered by a thick, firm capsule, which was carefully peeled off, the vessels and ureter ligatured, and the tumor removed. The capsule was closely adherent to the surrounding structures, especially to a knuckle of the ileum in its lower part, and to the ascending colon. In removing the capsule the facal odor was exceedingly powerful and penetrating, and was appreciable on the hands of the operator for forty-eight hours afterwards in spite of the most diligent efforts to remove it. There was no bleeding to speak of,-the site from which the mass had been removed was carefully cleansed, the capsule was sutured to a limited area of the abdominal wound and packed with iodoform gauze. The operation was completed in less than an hour, and the patient was removed to her ward in a very weak condition. She rallied, however, and continued pretty nearly as well as before operation for sixteen hours, when she died.

This case is very unusual—in fact, in my own experience, unique both in its pathology and in the symptoms which it gave rise to. In Dr. Cotton's letter from which I have already quoted he says: "The only opinion that I could form was that the tumor (whatever it was) had formed an attachment to the bowel, and that a sloughing process was going on in the tumor and discharging through the bowels at the same time, causing all the symptoms of systemic poisoning which she had more or less all