uterus is an edged tool, and though our graduates are far from fools, yet it must be admitted that they are little better than children in the use of uterine instruments. It is one thing to have a man of Dr. Mundé's experience empty a uterus with a curette, and quite another to place that instrument in the hands of a student for the same purpose; and any one who will teach his class that they are at once to attack every case of abortion with finger, forceps, or curette, will incur a responsibility which, I for one, would be sorry to undertake.

REMOVAL OF A LARGE FATTY TUMOR.

BY J. W. MACDONALD, M.D., L.R.C.S.E.; LONDON-DERRY, N. S.

(Medical Officer to the Steel Co. of Canada.)

Mrs. C., aged 45, came under my care, suffering from a large tumor on the back, over the situation of the last three dorsal vertebræ. It had been growing for eighteen years, and for the last two years had been suppurating. She suffered very much from the weight of the tumor, as well as from the intense pain which accompanied the suppuration. The growth was pendulous, measuring three feet in circumference at its thickest part, and twenty-three inches at its neck. Over its surface were enlarged veins ramifying in every direction.

I decided to remove the tumor. The distended blood vessels threatening to be troublesome a tourniquet was applied to the neck of the growth, by passing the band of the instrument over two flat pieces of wood, so that the neck of the tumor was pressed between them. This controlled the hemorrhage very satisfactorily, and allowed me time to secure the arteries by torsion, until about half the dissection was completed, when it was necessary to remove the tourniquet, in order to get at the parts of the tumor which were more deeply attached. The bleeding was more profuse in this stage, but by proceeding cautiously, and twisting the arteries as soon as divided, the operation was completed without the loss of more than a pint of blood. The deep portion of the tumor was firmly attached to the muscles and aponeurosis of the back, and to the spinous processes of the July 18, 1883.

10th, 11th and 12th dorsal vertebræ. All bleeding being stopped the wound, which measured fourteen inches in length, was brought together by silver wire sutures and dressed with carbolic acid solution, 1 to 40.

The tumor weighed 26 pounds and was an ordinary lipoma. The suppurating part showed no symptoms of cancer. For the first few days the pulse rose to 112, it then fell to 80, and she progressed favorably. On the 11th day the pulse and temperature again rose, and the wound discharged large quantities of unhealthy pus. Five grain doses of quinine, and thorough drainage of the wand, remedied these evils, and a complete cure was the result.

RADICAL CURE OF HYDROCELE BY CARBOLIC ACID.*

BY J. M. JONAH, M.D., EASTPORT, ME.

The author of the paper commenced by giving an interesting history of the treatment of hydrocele, describing the various methods which have been in fashion for centuries past. He alluded to the use of iodine, which he considered uncertain, and which in his experience had been followed by unfavorable results. He had commenced the use of carbolic acid in 1882, and had employed it in the manner recommended some years ago by Dr. Levis of Philadelphia.

He then gave the history of several cases he had successfully treated. The first was a chronic case in a young man whose hydrocele had been tapped thirty-eight times, and once injected with iodine. He drew off eight ounces of straw-colored fluid, and injected into the sac seventy grains of crystallized carbolic acid dissolved in about ten per cent. of water. A sensation of warmth was experienced by the patient, but no pain. On the sixth day after the operation the patient resumed work, and there has been no return of the hydrocele since.

The second case was also chronic, the patient having been tapped previously about twenty times. In this case also there were no ill-effects produced, and the patient was going about on the fourth day. Other successful cases under this treatment were also briefly described.

^{*} Abstract of Paper read before the N. B. Med. Society, July 18, 1883.