

mental recovery somewhat less, although 12, or 43 per cent., recovered, while 8, or 28 per cent., improved. This would show that 71 per cent. of the cases that were complicated were immensely bettered by operative measures.

As illustrative of the good work succeeding the treatment of pelvic lesions, I will detail the history of a few cases according to the numbers they occupy in the gynecological list.

CASE 1.—Admitted December 16th, 1899, at age of 27, was single. Had been insane eight months prior to admission. No hereditary history. At the time of operation, April 27th, 1893, she was classified as a chronic maniac, with marked sexual delusions, and was at times violent and destructive. Both ovaries being badly diseased, were removed. Her mental recovery was slow, but steadily progressive. She was discharged perfectly well, both physically and mentally, on September 11th, 1896, after an asylum residence of seven years.

CASE 51.—Was admitted November 10th, 1896, at age of 25. She was unmarried, and of good education. Her father was at one time mentally deranged for a short period. This patient had, before operation December 1st, 1896, been in other asylums since May 28th, 1892. A left ovarian cyst as large as an orange was removed, and the left ovary being adherent was partially excised. For two months she had two or three violent outbursts of excitement, and destroyed all her clothing. After that time she seemed to become suddenly well, and remained so until her discharge on September 12th, 1897, after spending  $5\frac{1}{2}$  years in three different asylums for insane, and classified as a chronic, hopeless maniac.

CASE 56.—Was admitted on December 3rd, 1896, at the age of 30. She had had three children. This case was one of peculiar interest. She was found wandering in a condition of dementia, on the G.T.R. station platform in London. She could give absolutely no history of herself. After a residence of a month in jail she was removed to the asylum for treatment. On December 29th, 1896, she was operated upon. The uterus and ovaries were grossly diseased and bound down in pelvis. The uterus when freed was suspended to the abdominal wall, but both ovaries were so badly diseased that they were removed. Subsequent to operation she was very excited and noisy for two days, and woke up on the third morning perfectly well, mentally. She then detailed a full history of herself: how she had been insane for some time previously in the United States, and being discharged improved from a U. S. asylum; she relapsed mentally and finally got separated from her family and wandered to London. She was discharged, fully recovered, on June 16th, 1897, and sent to her friends in Pennsylvania.