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Another Case of Ovariectomy:—Successful. By ROBERT CRAIK, M.D.,
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&c., &c., &c.

It will be remembered by some readers of the Journal, that in July, 1869, I published the reports of two cases of Ovariectomy occurring in my own practice, one of which was unsuccessful and the other successful. I have now to add a third case which has also, I am happy to say, proved successful, and which—apart from the obvious duty of placing all such cases on record, whether successful or unsuccessful—may be considered of sufficient interest to repay perusal, on account of its involving several important points of practice.

Mrs. G., aged 37, the mother of four children, the youngest born in 1865, consulted me on the 10th of August, 1869. She had been increasing in size during the previous five or six months, without pain, and without cessation of the menses. Her circumference at the time of my examination was $32\frac{1}{2}$ inches at the umbilicus, and a distinct fluctuating mass could be felt extending upwards from the left iliac fossa, and causing the abdomen to project as in the seventh month of pregnancy. There was dullness on percussion over the tumour, and resonance towards the lumbar regions and ensiform cartilage.

A vaginal examination showed the uterus of its normal size, and slightly displaced downwards, and to the right.

As the patient's general health had scarcely at all suffered although there was undoubted evidence of an ovarian tumour of considerable size and of rapid growth, it was a very serious question what to advise under the circumstances. I need scarcely say that no other mode of treatment than that by operation was for a moment entertained, but the embarrassing question was *when* should the operation be undertaken, whether would it be better