

the previous case, but was not at first successful, because the traction was too great owing to shortness of the ureter, although the bladder had been detached from the symphysis so as to bring it an inch nearer to the end of the ureter. It only partially pulled out, in about one quarter of its circumference, and a month later a second operation completely cured it, and she is now perfectly well.

The third case was a woman with a large, broad ligament cyst, extending up to the liver. As it had dissected up the posterior layer of peritoneum, it required a great deal of tying and cutting in order to get it out at all. In one of the many bands holding it down was the left ureter, which was carefully avoided until near the end of the operation, when it was picked up without being recognized until the scissors had gone three-quarters through it, when the mucous membrane of the ureter showed what had been cut. It was carefully sowed with two layers of black silk sutures, the first row interrupted and the second continuous. As it was then found impossible to extract the last portion of the cyst from the depths of the pelvis, where it was imbedded among arteries and veins, I resorted to the old plan of marsupialization, that is, cutting the tumour off at the level of the abdominal wall, and sewing the edges of it to the peritoneum. One drainage tube was put in down to the bottom of the cyst and another to the cut in the ureter. There was no leakage from the ureter, and the tube was removed in two days, and the cyst drainage tube was removed in a week, when it ceased to be required. The patient made a good recovery, and is now well.

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The ninth regular meeting of the Society was held Friday evening, February 3rd, Dr. J. A. Macdonald, President, in the chair.

Dr. BELL.—This specimen of hypernephroma was removed from a young married woman, aged 37 years, on January the 19th. She had always been healthy, was the mother of three children, and had first noticed a small lump about two years ago, when she was in the third month of pregnancy. There had been practically no symptoms, and never any hæmaturia, though at times there was frequency of micturition, and lately a little pain and some tenderness. On examination, this specimen was reported by Dr. Adami to be a lipoma of the kidney.

In this connexion I wish to show these plates of a similar tumour which I removed in the General Hospital in 1890. The specimen itself, which was in the museum, has unfortunately been lost. The patient was a French Canadian woman, aged 39 years, the mother of seven children, with a tuberculous family history, suffered from a septicæmia, which had extended back to the previous December. She was admitted to the hospital on September 15th, and operated on in the