

pelvis of both patients. It was tender to touch. Both had been curetted for a supposed abortion. In one the hematocele was intact. The other had half a pint of blood free in the abdominal cavity, and a hole in the lower part of the sac showed where secondary rupture had taken place. A portion of the omentum had forced itself into this aperture and had practically occluded it.

Case III. was a three or four weeks unruptured tubal pregnancy, found accidentally while operating for a large ovarian cyst. The left tube was involved.

CASE IV. Primipara, age 17. Had missed two periods, after which she experienced sharp local intermittent pains in the right side of the pelvis, accompanied by some rise in temperature. Examination revealed a tender mass, the size of an orange, occupying the right side of the pelvic cavity. The symptoms subsided, and for two months the patient was free from unpleasant sensations. One evening the intermittent pains reappeared, and became so severe they decided the patient should submit to operation. The tube was found to have been ruptured, and formed part of the wall of the resulting hematocele, which was intact. A small fetus was found in the cavity of the hematocele.

CASE V. Primipara, age 29. This patient had been perfectly well, had menstruated regularly and normally. One morning, without any warning, she experienced a severe localized pain in the right side, after which she fainted. Two hours later she regained consciousness and was able to summon aid. Examination at this time revealed a general soreness in the abdomen. Color and pulse good. A bimanual pelvic examination elicited nothing abnormal. During the evening and night following the general abdominal soreness increased. A gradual pallor spread over the patient's face, and medical aid was again summoned in the morning. She was then almost pulseless, her face was blanched, and she appeared to be in collapse. She was at once removed to a hospital and the operation was performed immediately. The peritoneal cavity contained about three or four pints of free blood and some recent clots. The tube was found to have ruptured near the tubo-uterine junction. Chorionic villi were found in the sac within the tube, but the fetus could not be found.

CASE VI. M. S., age 31. Had a child ten years ago, and a number of miscarriages since, the last one occurring one year ago. She had menstruated regularly up to six weeks before the