the fimbria inserted, quite apart from the affected Graefian follicle, the walls of which were absolutely similar to those of a corpus luteum. The fetal tissues were identical with those in a uterine pregnancy.—*The Med. Review.*

Hydatid Mole in a Virgin: Membranous Dysmenorrhea.

Rock (*Bull. de la Soc. Belge de Gyn. et d'Obst.*) relates the case of a child aged 12½, well cared for, and living under conditions which rendered her virginity above suspicion. Two months after her twelfth birthday the first period occurred. Clots were passed without pain. At the second period there was pain, and a clot was passed. This clot was covered with a white membrane, forming a perfect cast of the uterus. On microscopical examination the cast proved to be endometrium, with uterine glands and ciliated epithelium. Thus already the child suffered from membranous dysmenorrhea. The phenomenon was repeated at the third period. The fourth was extremely painful. There was slight show for three days, then a typical hydatid mole was expelled. Its base measured over ¾ in. It was made up of vesicles arranged like rows of beads; each vesicle was full of a transparent serosity, its wall was composed of loose fibro-cellular tissue with many veins. The vesicles varied in size, the smallest were of the dimensions of a pin's head, the largest as big as a pea. The next period, and all that have succeeded, have been normal; the child has been watched ever since the expulsion of the mole four years ago.

The writer suspects some relation between the membranous dysmenorrhea and the mole. A piece of the diseased endometrium or menstrual decidua may have remained behind and undergone a pseudo-placental change. Jacobs has already asserted that the hydatidiform mole may develop independently of gestation, and Bock's case, in his opinion, proves that theory. Keiffer suspects that there may be more than one variety of hydatidiform mole.—*The Med. Review.*

A Case of Annular Separation of the Cervix during Labor.

Julius Sachs (*Philadelphia Med. Jour.*, January 14th, 1899) was called to see a primipara in labor. Forceps had been applied three times, under chloroform, but the head could not be extracted. He considered the head impacted in the pelvis. Before applying the forceps the writer wished to make a thorough digital examination. On introducing the fingers into the vagina, a lump of soft tissue was felt, which proved to be the amputated cervix, two inches wide, and twelve inches in circumference, hanging to the uterus by about half an inch of tissue. This point of attachment was severed with but slight loss of blood. Forceps were then applied and a living child extracted. An