ride as 1–1000. It was not safe to wait in these cases until a distinct tumor had formed.

DR. T. GAILLARD THOMAS of New York spoke of three forms of pelvic abscess : (1) Inflammation of the broad ligaments ; (2) of the cellular tissue between the vagina and posterior part of the uterus ; and (3) the cellular tissue between the bladder and the uterus. Another form he would add, viz., pyosalpinx. He thought that laparotomy could often be avoided by draining through the vagina. Fluctuation in hard pelvic tumors often cannot be obtained, and still contain pus. Constitutional symptoms should not be waited for. He said there are but two localities through which pus should be let out from the pelvis— the vagina and through the abdominal wall. . An abscess pointing towards the rectum should never, if possible, be allowed exit there, it is a calamity. Dr. Thomas cited two cases of death from the escape of fæces and gas into the abscess cavity. Neither should an abscess ever be opened into the bladder ; he dissected up the paravesical tissue as he would in extirpation, and got at the abscess in this way. He used a dilator and always drained. Pelvic abscesses are always immoveable, neoplasms moveable ; this was a valuable diagnostic difference.

DR. GILL WYLIE (New York) thinks that four out of every five cases occurring within a year or two after delivery were due to salpangitis or ovaritis. He prefers to open the abdomen at once ; it is of no use to leave a rotten ovary behind after opening the vagina. . Dr. Wylie spoke of one patient having died in New York and one in Chicago from using an aspirator in pelvic abscess.

DR. POLK believed pelvic abscess to be directly due to tubal disease, the infection being carried by the lymphatics from the uterus.                          :

[It will here be noticed the extraordinary and marked diversity of opinion existing between the foregoing surgeons regarding the cause and treatment of pelvic abscess.]

DR. SUTTON said it was not the stem or the sound that produced pelvic abscess, but the infective matter introduced with either.