

now presents an emaciated and careworn appearance. Has consulted five different medical men in towns of New Brunswick and the State of Maine, who all seemed agreed that she was suffering from a tumor which was "connected with the womb," and gave it as their opinion that it could not be removed. Her family physician called her husband to one side just as they were starting from home to consult me, and told him that if she was operated on she would be brought back a corpse.

On examination I found a large hard tumor occupying the whole of the lower abdomen, somewhat irregular on its surface, and at one or two points indistinctly fluctuating. Slight resonance in left lumbar region; dull elsewhere. Per vaginam: os tincae felt directed somewhat posteriorly, and sufficiently patulous to admit the tip of forefinger. Fundus of uterus anteflexed, and tumor pressing closely down upon it; the two seemed to move together more or less in all directions. Sound could be passed only one inch. When the tumor was however lifted well upwards by Dr. Coburn, of Fredericton, who assisted me at the examination, I could enter sound the normal distance by directing it well anteriorly, and I then found that the uterus and tumor could be moved more or less independently of each other. On aspirating tumor at a point which seemed to be more fluctuating than the rest, a small quantity of thick mucilaginous fluid was got. I therefore diagnosed an ovarian tumor, and advised operation. While resting after her long journey for a few days, the catamenia came on.

*March 31*, 11 a.m., Operation.—Chloroform administered, assisted by Drs. Coburn and Ellis. Incision below umbilicus and tumor tapped. Only a pint or two of fluid got away, and I therefore extended incision upwards to above navel. Some adhesions on the front and left side, were readily broken down, and the tumor delivered. Clamp applied to pedicle and secured externally. Sutures; carbolized oil dressing, with cotton wool and bandage. Pedicle sopped with tinct. benz. co. Half a grain of morphine suppository after operation.

*April 5*.—Wound dressed every day as at first. Has required four or five opiates; considerable vomiting for the first thirty-six hours; attributed it partly to the milk given. Since then has eaten

soda biscuit and tea. Temperature has not risen above 99.2° F. since operation. May chew a little beefsteak to-day. Two sutures removed.

*April 7*.—Abdomen has been considerably distended for the last day or two, and yesterday evening pulse and temperature ran up to about 100° F. No great pain or tenderness, however. All sutures removed yesterday. Patient feels as if bowels ought to be moved, and I therefore ordered oil, to be followed in a few hours by enema.

*April 8*.—Bowels moved twice with some griping last night, and I ordered quarter grain suppository of morphine, which caused her to rest well till morning. Pulse 76, temp. normal. Some suppuration in stitch holes.

*April 18*.—Has done well since last report. As clamp has not come away, and the stump is swelling rather badly, I cut the latter close beneath clamp and took it away. There was no bleeding, as the parts were completely dead.

*Nov., 1884*.—As far as known, continues well to date.

CASE III, *Oct. 24, 1878*.—Miss T. R., æt. 18. Health usually good; catamenia always regular since 13. First noticed some enlargement of abdomen last February. Consulted Dr. Holden, of St. John, N.B., in June, who diagnosed ovarian tumor, and treated her first with iodide and bromide of potassium; of late he has put her on tonics. Abdomen has steadily enlarged, till now it measures thirty-three inches around umbilicus. It fluctuates everywhere. No marked change from health in the general appearance, but she has suffered a good deal of pain in part for a few days past. Ordered opiates pro re nata.

*Oct. 27*.—Has required quarter grain doses of morphine two or three times in the twenty-four hours; vomiting has been somewhat troublesome from it. Pulse 96, temp. normal.

*Oct. 30*.—Pain not so severe; pulse 108, temp. normal.

*Nov. 4*.—Pain has subsided; pulse 96.

*Nov. 9*.—Chloroform given and a vaginal examination made. Cervix uteri was in normal position. Anteriorly, a firm mass filled roof of pelvis. The hymen being perfect, this examination was not very satisfactory.

*Nov. 11*.—To have half an ounce of castor oil to-night, followed by an enema in the morning.

*Nov. 12*, 11 a.m., Operation.—Chloroform ad-