

of soda was ordered, and each of these ingredients pushed as far as the patient could bear them. At the end of six weeks all murmurs had ceased; but though the patient was allowed out of bed, the treatment in other respects was continued for about two months longer. I had a letter from the young lady a short time ago, stating that there had been no recurrence of the heart trouble, and that her health was all that could be desired.

The second case, Mary K——, from my own part of Ontario, Huron, was brought to Toronto and put under my care. There was certainly very severe cardiac trouble, a good deal of dyspnoea, a scanty amount of urine secreted, the limbs cedematous, and the abdomen considerably distended. The patient was at once ordered to bed, and put on a milk diet. The same mixture of potassium iodide, salicylate of soda, and digitalis prescribed. To aid in relieving the dropsical state of the body, an incision was made over each internal malleolus about an inch in length, and freely through the subcutaneous tissue. The discharge of fluid was very free for the first three days; but by the seventh, nearly all trace of anasarca had disappeared. The recumbent posture was maintained for nearly two months, and she left the city in a very good state of health, and with the merest trace of the cardiac murmur, so audible at the commencement. She is still taking her mixture, and I am quite confident that in due time the disturbance will have entirely ceased.

I base the treatment upon the following principles: 1st. A milk diet, because it is nutritious and leaves little residue for the digestive system to get rid of; while it favours the action of the kidneys. 2nd. The maintenance of rest, a condition that secures muscular inactivity throughout the body, and gives the heart as much ease as possible. This is very necessary, just as in the treatment of any inflamed organ. 3rd. With regard to the medicinal treatment I need say nothing further than that I am a firm believer in the protracted use of some preparation of salicylic acid after an attack of rheumatism, so as to eliminate from the system as thoroughly as possible the tendency to recurrence, and to remove any complications that may have taken place.

When we find a murmur during or following an attack of rheumatism, I hold that it is impossible to say whether it be due to actual deposits upon, or around the valves, or only to swelling and thickening of these parts. It is, therefore, our duty to follow that line of treatment which will remove the latter condition, or improve the former, if unfortunately it should exist, and thus place our patient in as favourable a condition as possible, for making a good recovery in the least time.

REMOVAL OF A FIBRO-CYSTIC TUMOUR, OF THE UTERUS, WEIGHING TWELVE POUNDS.

BY DRS. STEWART AND HURLBURT, BRUCEFIELD.

Miss W., aged eighteen, when first seen on the first of last June complained of swelling of the abdomen. She first noticed that she was getting larger than usual a little more than two years ago. During the last few months there has been a steady and marked increase in the size of the abdomen with a general loss of flesh and strength.

She always enjoyed good health previous to her present trouble. Family history is good. The catamenia first made their appearance three years ago, and continued at irregular intervals until five months ago, since which they have been very regular.

The abdominal cavity is the seat of a large tumour which can be traced into the pelvis. It can be moved in all directions. It has a semi-solid feel. With the exception of a small line of resonance in the right flank the whole abdomen as high as four inches above the umbilicus is dull. The abdomen is unequally distended. It is nearly two inches further from the umbilicus to the right anterior superior spine of the ilium than it is between the corresponding points on the left side. No fluctuation can be detected in the tumour, neither can any free fluid be made out in the abdominal cavity. The uterus is pushed down and Douglas's pouch is obliterated. The uterus is normal in size.

There is slight cedema of the lower extremities.

Nothing abnormal found on making a physi-