

not so from ulceration but from enlarged papillae. The tumour lay somewhat obliquely across the bottom of the vagina, completely hiding from view the os and posterior lip.

Dr Ferwick judged from its appearance, the age of the patient and her general condition, that it was not malignant, but a benign papillary growth, and decided to remove it. This he did by the galvanic Ecraseur. Passing the loop of platinum wire around the tumour as high up as possible, he connected it with the electric conductors of a four-celled battery. The tumour came away in about two minutes, leaving a smooth, charred stump, without a drop of blood. The sides of the vagina were a little burnt, by the heat of the canulla through which the wire passed. This on another occasion could be avoided by winding silk around the canula. The patient had no bad symptoms after the operation. Now, at the end of three weeks, the sloughs have separated and the stump is rapidly healing. The discharge is very slight. It was rather offensive for a time for which injections of Condyl's Fluid were used. The tumour was examined by Dr. Osler who pronounced it to be not malignant but to consist of hypertrophied papillae, connective tissue and blood vessels.

Fracture of the Ulna, with dislocation forward of head of Radius.

W. S., aged 22, was driving a butcher's cart, when the horse ran away and he was pitched out against a hydrant, the fore arm, which was flexed, striking the hydrant near the elbow. When brought to the hospital we found a fracture of the ulna, about two inches from the point of the olecranon, and a prominence in front of the point on the radial side. The patient could not flex the forearm. The head of the radius was readily returned to its proper position and retained there as long as the arm was well flexed. A posterior splint of gutta percha was applied, bent at an angle of about 50° , and a straight anterior splint was ap-