

the double advantage of revealing solid bodies which could not otherwise be discovered, and it also prevents collapse during the operation, due to hæmorrhage into the azygos and other veins caused by the sudden withdrawal of their accustomed support.

The Dermoid cyst of the ovary which I present this evening was removed on the 26th November, from Mrs. J. H., 48 years of age, a native of Newfoundland. Her previous history was good, menstruation having commenced at 14, normal in character and stopping at 38. She had had 8 children and two miscarriages. There was no albumin in the urine. She had first noticed the tumour about seven years ago when it was about the size of an egg, since which time it had gradually increased until it was as large as an adult head. By palpation the whole abdomen was found to be full of fluid, but on deep pressure the hand came upon a solid tumour which was freely movable, occupying the middle of the abdomen. On opening the abdomen about a gallon of straw coloured serum escaped or was sponged away, and then the tumour could be seen to be a tensely filled cyst with the omentum adherent to it for a distance of four or five inches. This was ligatured in segments, and the cyst partly emptied with a trochar after which it was easily removed and the large pedicle tied in several places. On the back of the tumour, opposite the part where it would be lying on the promontory of the sacrum, there were four or five white nodules which I had never seen before on a dermoid cyst and I thought that these might have been the beginning of malignant degeneration to which dermoid cysts are liable, but both Dr. Richardson and Dr. Gurd, who made microscopical examination of these nodules, pronounced them to consist of fibrous tissue containing ill-defined cells, but not apparently malignant. The patient made a good recovery and went home in four weeks.

Dr. C. A. Richardson exhibited the pathological specimen from this case and reported that on section through the capsule of the tumour nothing but fibrous tissue was noted.

Dr. W. F. HAMILTON, read a paper upon Lead-Poisoning with summary of 30 cases.

#### MONTREAL MEDICO-CHIRURGICAL SOCIETY.

The sixth regular meeting of the Society was held December 16th, Dr. J. A. Macdonald, President, in the chair. The programme for the evening was a discussion on Actinomyces, which was opened by Dr. James Bell. Drs. A. G. Nichols and C. B. Keenan discussed the bacteriology, Dr. W. W. Chipman some clinical aspects of the condition in gynaecology, Dr. J. G. Adams the nomenclature and classification, and Dr. W. F. Hamilton the condition from a medical point of view. This discussion is reported fully at page 81 *et seq.*