culty, though the adhesions were numerous, and the operation was complicated and prolongued by the bursting of a cyst. The pedicle was broad, and as is his custom, he ligated it in sections with shoemaker's thread. The patient's temperature rose to 101° the day after operation, but soon fell to normal, and remained there.

Dr. SHEPHERD mentioned that a short time ago he had operated in a case of ovarian tumor (in a childless married woman aged 29), with a history of only eight weeks' growth. The patient was seen by Dr. R. P. Howard a month before the operation, and at that time the tumor was of small size; it grew very rapidly, and in three weeks was quite large. At the time of operation, it was doubtful whether this rapid increase was not due to ascites. However, it proved to be a single ovarian cyst, with a solid base, containing 20 pints of thick fluid and weighing some five pounds. The patient did well, and was able to return to her home in four weeks.

Undeveloped Bones in an Idiot.—Dr. R. L. MacDonell showed the bones of the lower extremity of an idiot which had been sent to the dissecting-room of McGill University from one of the institutions of the city. The individual was said to be 20 years of age, and had never spoken or walked. The bones, although of good length, were remarkably small, the femur not being thicker than an ordinary sized finger. The hip-joints were ankylosed in the flexed position, and there was contraction of the knees. The muscles of the lower extremities were strings of fibrous tissue with a little muscular tissue about them. The head, although somewhat microcephalic, was of good shape. In both femurs there was a well-developed third trochanter.

Dr. Hy. HOWARD said such cases were common in all lunatic asylums.

Hemorrhage into the Pons Varolii.—Dr. R. L. MacDonnell read the history of a case of hemorrhage into the pons Varolii. An old man, aged 62, was admitted into the General Hospital on 31st July, 1885. He had been picked up by the police in the streets, and was in a semi-unconscious condition, unable to communicate anything whatever regarding his history. He was a tall, thin man, very anæmic, with wasted and flabby muscles. His expression was dull and listless, and though he could utter words when spoken to, he was by no means rational. The pupils were equal, but the left was more sluggish than the right. There was slight paresis of the left side of the face, and the right side of the body was weaker than the left. There was increase of the superficial reflexes, but normal patellar reflex. The urine and fæces passed in bed; he was always in a semi-comatose condition; pulse 90, and feeble. On the 3rd of August, his breathing was stertorous, the paresis of the left side of the face more marked, and coma more profound. Next day the coma was complete, pupils contracted and unequal; large, moist râles heard at the basis of both lungs; toward evening he died comatose. The brain alone was examined after death, when a fresh clot was found in the pons Varolii, occupying the posterior or lower part, and situated rather more to the left than the right side. Dr. MacDonnell remarked that the central situation of the clot was shown by the equality of the paralysis on either side, and the greater weakness of the right side being accounted for by the position of the clot. It was a case of alternate hemiplegia, the left side of the face being paralyzed, though to a slight degree. This is characteristic of pontine hemiplegia, especially when the lower half of the pons is injured, though usually the fifth and sixth nerves are also involved. There was nothing distinctive in the condition of the pupils, which were not, as usually described, contracted, but merely sluggish in their reaction to light. In hemorrhage into the pons, one of two opposite condition is usually observed: contraction of the pupils when the lesion is sudden and situated in the upper part of the pons, causing irritation of the nuclei of the third nerve; and dilatation from complete invasion and destruction of these nuclei.

Dr. Hy. HOWARD asked if, at the post-mortem, the ruptured vessel had been found, as it was most important to know exactly the source of the hemorrhage.

Dr. WILKINS related a case of very extensive hemorrhage into the pons, where the patient lived for eight days.

Dr. STEWART asked if the whole of the left facial was effected, or only the respiratory branches?

Dr. MACDONNELL, in reply, stated that the ruptured vessel had not been found, and that the whole of the facial was paretic.

Cerebral Syphilis.—Dr. Geo. Ross reported a case of supposed cerebral syphilis which had occurred in his wards in the General Hospital since his paper on that subject was read before the Society. The patient died a few days after admis-