25, has been married two years; no children. For past seven years has suffered greatly during menstruation, but says what she lost has always been fluid blood with the exception of one occasion, about a year ago, when, after "missing" three months, and while at the water-closet, felt as if some small mass had come away. During the night before expelling the above cast, patient had had agonising pains for several hours. She had not seen anything for two months. The cast was the shape of the interior of the uterus, and weighed about three drachms. It was of a soft, membranous consistence, and easily torn.

Dr. Trenholme thought, from the history of the case and from its appearance, it was the decidua of conception.

Dr. Gurd mentioned that the appearance exactly corresponded with what Dr. Thomas of New York describes as being a true membranous dysmenorrhea cast, viz.: "External face soft and irregular, with perforations answering to opening of the utricular follicles. Inner face smooth, and feeling like mucous membrane."

Dr. GARDNER said that it did not look like the product of conception.

The specimen was referred to Dr. Wilkins for microscopical examination.

Ovariotomy-Removal of Pelvic Tumor containing Pus—Death forty-four hours after.—Dr. GARDNER exhibited the tumor, and a bottle of the pus, which was odorless. Patient was unmarried, æt. 21, from the country, and with history of good health up to December last. Eight weeks ago became ill, feverish, and had repeated rigors. In the evening would have a rigor and temperature of 103°. A tumor about size of gravid uterus, at fifth month, was noticed in the left iliac region, rounded, smooth, elastic, and not sore. became emaciated. Her physician diagnosed a suppurated ovarian tumor. On examination, the uterus was felt anteverted and immovable. The sound entered 21 in. Roof of vagina was encroached upon by the growth. Operated last Wednesday; it was very tedious, as there were adhesions all around to the pelvis. By tapping, 32 oz. of odorless pus came away. Over the surface of the tumor was a much dilated fallopian tube. The hemorrhage was difficult to control/ Patient died after 44 hours. It was either a dermoid cyst lighted up to activity or an ordinary ovarian tumor, the sac of which had suppurated.

Interrupted Menstruction.— Dr. Gardner said that lately he had seen, in consultation, a lady, aged about 43, who has commenced menstructing regularly after an interval of 14 years. During her early married life she had three children, after which her husband became morally insane, was morose, and lost all affection for wife and children. She was obliged to leave him. The return of the flow excited fears of malignant disease or tumor. Examination showed nothing wrong, except slight hyperplasia of the uterus.

Progress of Science.

WHAT IS MEANT BY NERVOUS PROSTRATION.

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[Read before the Philadelphia County Medical Society]

The popular conception of the condition now known as "nervous prostration" is a state of debility in which nervous derangements predominate. A man actively engaged in business or in public life presently finds himself unequal to his daily tasks; he suffers odd sensations in his head; his digestion is disordered; he is weak; wakefulness, mental depression, and a thousand and one new sensations of strange character and fearful portent are superadded. The unfortunate subject of these ills now recoils from his work, gives himself up to the consideration of his symptoms, and relaxes his hold on the interests and occupations of his life. All the world declares he has "nervous prostration," and this explanation satisfies. Physicians say "neurasthenia" or "hypochondria," according to their habits of mind or their training. Sometimes this condition is called the "American Disease." Indeed, there is a general notion, widely prevalent, that neurasthenia is a peculiarly American malady. The late Dr. Beard was the apostle of this dispensation, and he not only was noisy and persistent in his advocacy of that view, but claimed, indeed, to have first clearly defined neurasthenia, and to have classed under this designation the numerous symptoms pertaining thereto. If we cannot admit Dr. Beard's claim in its entirety, if we experience repulsion at his tremendous but unconscious egotism, we are still compelled to acknowledge that his work in this connection is the most important that has appeared. He was peculiarly atted to differentiate this malady, by reason of the quickness and acuteness of his intellect, his power of analysis in its subtlest aspects, and his far-reaching, his omnivorous faculty for related facts.