parts. At this point in the operation the cyst burst and a considerable quantity of fluid escaped into the abdomen. This had a peculiar urinous odor, but was quite clear. The abdomen was sponged out with warm water, the edges of the peritoneum adjusted over the raw surface, and the wound stitched up in the usual manner with silk; no drainage tube was used, and the sublimate gauze dressing was secured with plaster and a binder of flannel. All went well for the first week, the sutures were removed on the eighth day, and the wound found united; the highest temperature recorded up to this time being 101½°. On the tenth day the temperature reached 103, later 104½, with occasional chills and delirium at night, hay odor of the breath, and for almost three weeks her life was in considerable danger. On the twenty-first day, fearing that an abscess had formed, I passed the aspirator needle beneath the 12th rib into the abdomen, but nothing came through; after this recovery was slow, but continuous, and the patient was able to leave the hospital on the 1st of September and attend to her duties.

Case II.—Mrs. T., aged 43, a widow, and the mother of seven children; residence, Goderich. Admitted to St. Joseph's Hospital July 11th, 1889, and gave the following history:—Always had good health and led an active life; never confined to bed except during her confinements; six months ago the abdomen commenced to enlarge, and this had continued to the time of admission; there never had been any pain, but the tumor now began to cause discomfort from its size. Two physicians in Goderich had made an examination, she informed me, and both had recommended operation. The abdomen showed a large, fluctuating tumor extending from the pubes to the ribs, dull in the median line, resonant in the flanks; measurement greatest below umbilicus. No tumor could be felt in the pelvis. Examination of the heart, lungs and liver negative. Uterus movable and natural in size. Catamenia regular. The tumor was much larger than in the case just related. The patient was well nourished and rather stout in figure. Drs. Woodruff, Waugh and McArthur were called in consultation, and as the last case of mistaken diagnosis was still in the hospital, a very careful