

minates in an indurated plegmon or pelvic abscess ; or it may gain entrance to the pelvic connective tissue directly by means of the lymphatics. The staphylococcus, while comparatively rare, is sometimes obtained from pelvic abscesses, and the colon bacillus is sometimes found.

Setting aside those forms of pelvic inflammation in which the uterus, tubes or ovaries are first affected, it is my intention to confine my remarks to that form of inflammation which I have endeavoured to show may exist without involvement of these organs, namely, pelvic cellulitis having its origin in infection through those lymphatics which have their starting points in the vaginal fornices and infra-vaginal portion of the cervix. Pelvic cellulitis is often ushered in by a rigor. In puerperal cases the interval between the period of infection and the first manifestation of symptoms seldom exceeds a day or two. The general symptoms are those of a subacute form of septicæmia. There is usually pain in one or other iliac fossa, but it is not well marked, unless the inflammation extends to the neighboring peritoneum. Sometimes the local symptoms are so few and indefinite that the existence of an acute inflammatory process within the pelvis remains for some time unsuspected. In the early days of an attack of acute pelvic cellulitis physical examination gives but little information, but after the lapse of a few days the inflammatory exudation in the tissue of the affected area is at first doughy in consistence, but soon becomes densely hard. The cervix will now be found to have lost its normal mobility, and pressure on the supra-vaginal tissues on the affected side will elicit the presence of most exquisite tenderness, the patient often flinching on mere touching the part. It is seldom that both sides of the pelvis are equally affected, but it is by no means unusual to find the whole supra-vaginal portion of the cervix imbedded in a thick collar of indurated tissue, which more or less completely surrounds it. An area of uniform hardness may sometimes, at this stage, be felt in the abdominal wall beneath the muscles, usually taking the form of a broad band lying along the upper border of the inner portion of Poupart's ligament. Sometimes the exudation spreads upwards and outwards from above Poupart's ligament into the iliac fossa, interfering with the action of the psoas