

"On November 30, 1908 a curettage was performed but "nothing was found in the Uterus—the canal curved to the "right for 3 inches. There was a bulging to the right of the "Uterus—the Curette seemed to ride over some large rounded "body in the right side of the Uterus as if there was a *Fibroma* "or *Fibromyoma*. No decidua in Uterus—a few clots or rather "sticky gelatinous bloody mucus, but not ordinary clots."

She was admitted to St. Paul's Hospital. When I saw her on December 8, 1908 she looked very ill. She was very sallow in appearance, and anæmic murmurs were heard over the base of the heart. The pulse was 98 and the temperature = 98.6°. As she gave the history of robustness prior to the onset of this illness it was apparent that she had lost considerable flesh. There was no history of amenorrhœa; no morning sickness; no enlargement of breasts sufficient to attract attention. On examination of abdomen it was found somewhat distended and tympanitic with slight tenderness in the right Iliac region.

*Per Vaginam*: The mucous membrane and labiæ were very dark in appearance.

*Os Uteri* was hard and nodular.

*Body of Uterus*: Enlarged to the size of an orange, and in the right lateral fornix was to be felt a firm well defined mass *continuous with the body of the Uterus*.

There was a fœtid vaginal discharge. The breasts were not enlarged, but on deep firm pressure a suspicious exudation could be made out.

In view of the unhealthy condition of the Uterus a preliminary curettage was done. Small fragments of decidua were removed, but no trace of chorionic villi detected in them. No further hæmorrhage taking place the patient was allowed to rest for a few days preparatory to having a laparotomy performed. On December 16th, 1908, the abdomen was opened. In the pulvis were found dense adhesions of the omentum and bowel to the right tube and broad ligament, the separation of which revealed a large mass in the right broad ligament continuous at the side with the uterus and above with the fallopian