

and thereby displaced sufficiently from the brim to allow the flattened wedge-shaped head to slip past it into the pelvis ; labor then terminated in a few minutes. There was no hemorrhage either before, during, or after labor, which points to the cervical origin of the tumor ; in fact the presence of the tumor stimulated the uterus to continuous vigorous contraction after the expulsion of the placenta.

4. *Diagnosis.* A positive diagnosis was impossible. When the patient entered the Maternity the liquor amnii had been away for some hours, the uterus was in a state of tonic contraction, moulded about the contour of the child, sensitive to touch, and excited to still stronger contraction by any attempts at external palpation. Very little information was available, therefore, externally. The patient was a primipara, the vagina narrow and dry, the os undilated and almost out of reach, so that very little information could be got by vaginal examination. As the violent uterine action yielded to opium, fluctuation could be made out on the right side, quite separate from the main portion of the uterus, in which the outline of the foetus could be indistinctly felt. This suggested the possibility of twin pregnancy with two distinct amniotic sacs, the left and upper sac ruptured and empty, the lower unruptured, filling up the brim and preventing the descent of the first foetus. Foetal heart sounds could not be heard, and no help obtained from that source. Pregnancy in the horn of a uterus bicornis or a double uterus would not explain the absence of any presenting part at the brim. The tumor was too low for an ovarian tumor, too immovable for a pedunculated myoma, too soft and fluctuating for a solid fibro-myoma.

5. *Treatment.* When the patient entered the Maternity weak from want of food, exhausted from loss of sleep and continuous violent uterine action for seventeen hours, with liquor amnii away, the os undilated and out of reach, and the uterus in a state of tonic contraction, the case seemed very grave. As might have been expected, the foetal heart sounds were not to be heard ; such violent uninterrupted uterine action would soon asphyxiate the foetus. The foetus being in all probability dead, the mother's interests only had to be considered in deciding upon