

A RARE FORM OF PYOSALPINX COMPLICATING UTERINE  
MYOMA.

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The patient, æt. 44, had been married 13 years and a widow for nine months; never pregnant. Menstruation first appeared at the age of 14, and until marriage was scanty and painful, but during the whole of her married life profuse. In recent years there had been irregular hæmorrhages. She noticed abdominal enlargement soon after marriage. Increase had been slow; there had been for years tolerably constant pelvic pain and reflex neuralgia of the head and neck.

Examination revealed a tolerably fat abdominal wall, distended by a globular, smooth, insensitive, slightly movable tumour of the size of a two-year old child's head. The vaginal orifice and whole canal were so narrowed as barely to admit the index finger; its walls were rough, apparently cicatricial, tender, and bleeding slightly from touch of the examining finger. The uterine tumour was an ordinary interstitial myoma.

The main interest of the case consists in the condition of the Fallopian tubes, as illustrated by the accompanying photographs, showing the oval-shaped expansion without any adhesion to surrounding organs or structures. The patient made a good recovery.

Of the numerous cases of diseased Fallopian tubes which have come under my notice, I remember but one of pyosalpinx without adhesions. In this case both tubes were distended with pus, and the condition was pronounced by Dr. Wyatt Johnston to be tuberculous. The association of pyosalpinx with uterine myoma is at all times rare. Statistics from the experience of Dr. A. Martin are given by Dr. Maude Abbott in the detailed description of the specimen appended.

*Specimen consisting of intramural uterine myoma with double pyosalpinx.*

The tumour is situated in the anterior wall of the uterus and separated from its cavity by a thin layer of muscular tissue. The uterus is much enlarged, its cavity measuring 10 cc. in depth and the posterior wall