

interference the escape of the foetus per vias naturales was utterly impossible; 3d, that the space between the tumor and the pelvic wall, being less than one and a half inches, would not admit either of craniotomy, cephalotripsy, cranioclast, or any other mechanical interference per vaginam; and, 4th, that Cæsarean section, in accordance with the views of all writers, was certainly indicated as the only resort, provided it were impossible to remove the tumor by abdominal section, and proceed to a forced labour.

The great doubt as to the nature of the tumors, as well as its relations with the uterus, inclined Dr. Storer to the idea preliminarily of an exploratory section, upon the grounds that if such section were made, and a cyst of the ovary, or even a removable uterine fibroid, were found, the same could be evacuated or excised, and the foetus subsequently expelled in the natural manner, perhaps after the employment of Barnes' dilators. Accordingly a small incision was carefully made, some two inches in length, a little to the left of the median line, and three inches below the umbilicus. Upon cutting through the peritoneum there presented a large, smooth, bluish-colored tumor, which might have been taken either for the impregnated uterus, a discolored cyst of the ovary, or a fibrous tumor. This doubtful condition induced Dr. Storer to enlarge his incision somewhat, in order to introduce the hand. Exploration with the hand within the abdomen established the existence of a fibro-cystic tumor of the left and lower anterior wall of the uterus, with an out-growth nearly the size of the foetal head, originally pediculated, but now firmly adherent low down to the walls of the pelvis. On the right the uterus, with the foetal members plainly to be felt through its walls, was perceptible, but so retroflexed as to render it very difficult to cut into it at this point.

An exploratory incision was now undertaken in the tumor situated at the left. Each stroke of the knife revealed a regular series of concentric layers of fibrous tissue, not unlike that of the uterus. After cutting down to the distance of about two inches, the scalpel glided suddenly into a cavity, filled with a thick, brown, semi-fluid, putrilaginous substance, evidently resulting from degeneration of the fibroid. The hemorrhage being already very profuse and the danger from shock and exhaustion imminent, with a few rapid strokes of the knife, Dr. Storer extended his incision into the cavity of the uterus, and with all expedition removed a male child, weighing eight pounds; it being, as well as the placenta, in an advanced state of decomposition.

This accomplished, the next question to be decided was, what should be done with the mass left behind, including uterus and tumor. There was little time to be lost, for the hemorrhage from the incision into the vascular structure of the uterus, together with the open vessels at the site of the placental insertion, which it was evident that the irregular contraction of the uterus that was alone permitted by the tumor, could never stanch, was perfectly frightful. It was apparent that the tumor in the uterine wall would necessarily prevent a perfect contraction of the organ, and thus render suppression of the hemorrhage impossible, contrary to what

obtains in ordinary uncomplicated cases of Cæsarean section.

With his usual self-possession, Dr. Storer decided to remove the whole mass as far as possible, which would include the uterus, as well as the fibro-cystic tumor of the left wall, necessarily leaving behind the outgrowth posteriorly, the firm adhesions of which to the pelvis it was found impossible to dissect away or break down. Accordingly, a large-sized trocar having passed through the upper segment of the cervix uteri, and a metallic cord passed doubled through its canula, the whole was firmly tied in two parts. Fearing lest this constriction might not prove sufficient to check the hemorrhage from so vascular a part, especially the pedicle of the pelvic tumor, which was included in the ligature, the ecraseur with its chain outside the canula, to prevent drawing in extra tissues, was applied, and the mass slowly constricted. Having been removed, its stump was held by the ligature, and seared by the hot iron. Not feeling even then secure against a recurrence of hemorrhage, Dr. Storer applied his clamp-shield, which controlled the pedicle completely. Everything now being perfectly safe, without the least hemorrhage persisting, the abdomen was carefully cleansed of all coagula, and the wound brought together by ten deep silver sutures, which involved the peritoneum. The chloroform was continued to a limited degree, in order to ensure rest, and at the end of an hour the patient was allowed to rally. She returned to consciousness in the happiest way, without complaining of the least pain or discomfort. The operation was commenced at half past twelve M., and terminated at half past three, P. M. I remained with the patient during the remainder of the afternoon, and the whole night, during which time I made the following semi-hourly, hourly, and bi-hourly observations.

July 21st, 4 P. M. Pulse, 108; resp., 30; temp., 100 2-5; comfortable; mind clear.

4.30. Pulse, 108; resp. 30; temp. 100 2 5; mind clear; took stimulants, brandy and water 2 teaspoonfuls, 1 teaspoonful brandy to 6 water.

1st hour, 5. Pulse 112; resp., 34; temp., 101.

5.30. Pulse, 108; resp., 32; temp., 101 1-5.

2d hour, 6. Pulse, 112; resp., 34; temp., 101.

6.30. Pulse, 104, immediately after changing the soiled clothing; resp., 32; temp., 101 1-5.

7. Pulse, 112; resp., 34; temp., 101.

3d hour, 7.30. Pulse 108; temp., 101 2-5; resp., 32.

4th hour, 8.30. Pulse 110; temp., 100; resp., not counted.

5th hour, 9.30. Pulse, 116; temp., 100 3-5; resp., 32.

8th hour, 12.30. Pulse, 112; temp 100 resp., 32.

10th hour, July 22d, 2.30 A. M. Pulse, 112; temp., 99; resp., 32; comfortable. mind clear; took stimulants, brandy and water 2 teaspoonfuls.

15th hour, 6. Temp., 96; pulse, 104; resp., 30; comfortable; mind clear; stimulants.

16th hour, 7. Pulse 120; temp., 100 4-5; resp., 30.

[It is hardly necessary to continue the presentation of these observations, which were made until the morning of the third day, there having been up to this time but little variation from hour to hour. The following change now occurred.]