

complained of dorsal pain, and soreness over the abdomen, rest was enjoined, and ordered Sol. Amm. Mur. and Tr. Hyoseyamus, warm fomentations to abdomen, Morphia Sulph. at bed time. I again saw her about the 28th Jan. she complained of great pain in the right iliac region, appetite very bad, hectic symptoms, weak, rapid pulse, attributed her rigors to ague, insomnia and night sweats. On examination a hard circumscribed tumor could be detected in the right iliac region intensely painful, and as hard as a stone; no heat of vagina; can move the uterus without causing pain, micturition frequent, bowels regular, no drawing up or pain of affected side. Ordered warm fomentations; poultices of slippery elm, warm water enemata and warm vaginal injections of infusion of slippery elm, quinine, generous diet, and stimulants. This state continued till Feb. 12, when in consultation with Dr. Goodman, who coincided in the opinion that a pelvic abscess had formed, an early opening was decided upon, Sulpho-carbolate of quinine with decoction of cinchona were prescribed, and enemata of cod liver oil, and a blister over the tumour. On the 29th Feb., a subcutaneous incision near Poupart's ligament was followed by the discharge of about 6 oz. of healthy pus, with the subsequent drainage of about 2 oz. of pus into the poultices, the abdomen was bandaged, and poultices of slippery elm persevered with, and she improved until about March 15th, when a return of the symptoms took place. The abscess was again opened with a trocar near the first incision, and the contents were well pumped out with an exhausting syringe. From this time she convalesced slowly, and on the 3rd of April, her recovery was complete. I would remark that in this case, chloral in doses of 30 grains proved ineffectual as a hypnotic.

Mrs. C., mother of 6 children, enjoyed good health until three or four days prior to January 31st, 1871. Complained of nausea, want of appetite, pain in the back, bearing-down, difficult micturition, bowels costive, tongue furred, slight fever, pulse 85 and weak.

On a vaginal examination I discovered a tumour in the recto-vaginal fossa, posterior wall of vagina depressed and thrown into rugæ, anterior wall drawn backwards, os uteri thrown up; uterine canal directed forward, bladder slightly distended, could be felt above the symphysis pubis. On examination per