## A CASE OF EXTRA UTERINE FORTA-TION. By JAMES KERR, M.D., M.A., Londonderry, Nova Scotia.

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On June 26th, 1877, I was consulted, by Mrs. W., for an attack of severe abdominal pain, coming on suddenly, of a colicky character, and referred to the hypogastrium and left iliac regions. The pain was very acute, and only relieved by repeated large doses of opium; but it returned on the 30th with less severity, while it was more decidedly referred to the left ilium, extending through the region of the left hip and down the thigh. At this time, the attack was accompanied by vomiting.

Examined externally, and per vaginum; there was nothing discovered to explain these symptoms.

On inquiring into her history, I found that she had always been healthy, was forty-one years of age, married; had had four children -the youngest, if alive, would have reached its eighth year. Labors had all been difficult, and required instrumental assistance; had miscarried about a year before the present attack, but, since, had menstruated regularly up to June 1st, when she "took cold," as she said, and attributed her present illness to that cause : had always leucorrhœa since her first confinement. She was a small, bright-looking woman, now rather pale and exhausted from these repeated attacks, but looking otherwise healthy. There was no tenderness anywhere over the abdomen, and no discharge except the leucorrhea from vagina; bowels habitually constipated, tongue clean and pulse quickened. During following month she had several similar attacks of this colicky pain, but less severe; and, during this month (July), she told me that her menses had returned, and were more copious than usual; the vomiting continuing as before.

It was in the early part of August that the patient suggested the fact that she was pregnant; and, on again examining her, I confirmed that opinion. I found the abdomen somewhat enlarged, the os soft and puffy, and the uterus itself considerably increased in volume. Her health became now much improved; she had no recurrence of the colicky or cramping pains, and her condition did not differ from that of ordinary pregnancy at this stage; we agreeing

that she was now about three months gone. Nothing unusual occurred during the three following months.

In December, a return of the pain brought her again under my observation. This pain I decided was caused by an attack of sub-acute peritonitis. The abdominal tumor had much increased; and I remarked, at this time, that it was more prominent than usual in pregnancy, and somewhat of an irregular outline; an enlargement on its surface being apparent towards its upper, and another towards its lower, extremity.

The upper enlargement felt hard, bony and very superficial, the lower soft and very tender on pressure; pressure here causing pain through the region of the hip and down the thigh, somewhat resembling the pains she first complained of; the body of the tumor gave dis tinct fluctuation. Fœtal movements were very distinct, and appeared unusually strong, but I failed to hear the sounds of the fœtal heart.

Examined per vaginum; I was surprised to find the os now small, hard, and out of character with this period of gestation. The tumor felt firm, and immovably fixed in the pelvis, and a round firm prominence was felt filling up the recto-vaginal space. After repeated and careful examinations, which were conducted with some difficulty owing to the tenderness of the parts, I came to the conclusion that this growth was independent of the uterus, and that the body which was felt against the rectum was that organ retroflexed.

I had a consultation with Dr. Page, of Truro, who saw her twice with me about this time, and to whom I expressed my conviction that we had to deal with a case of erratic gestation. Our efforts to pass the sound were unavailing, and we were equally unsuccessful with a probe. She was also seen by two other medical men, whose diagnosis I may say did not agree with mine.

I now kept her under continual observation. Her condition remained much the same, except increased tenderness up to the second week in February last, when, after an unusually violent series of fætal movements, they suddenly ceased. This was about two weeks from her term. About term, she was seized with all the symptoms of labor, accompanied by a free discharge of blood and of clots from vagina; these symp-