

the duct it was found to be occluded by the cicatrix of the previous operation.

*Hæmatoma of the Fallopian Tubes.*—Dr. Alloway exhibited the specimen, removed from a patient who had been complaining of extreme pelvic pain, menorrhagia and sterility since the time of her marriage six and a half years ago. Commenting on the case, Dr. Alloway said that until quite recently this condition was supposed to occur only in tubal pregnancy, but now it is known that it may be produced by any inflammatory condition or excessive congestion.

*Hæmatoma of the Ovaries.*—Dr. Alloway exhibited two specimens of this condition. The first had been removed from a woman suffering from pelvic pain and menorrhagia. A prominent symptom was nervous tremor, which he attributed to loss of blood and general debility. The appendages were found fixed in a mass which was removed. The ovaries were perfectly riddled with blood cysts. The second specimen was from a woman suffering from menorrhagia and constant pain, and in whom he had diagnosed a myomatous uterus. There was also sub-involution of the tubes.

In all these cases he had used catgut instead of silk for ligatures, and had found no evidence of want of strength.

*Total Extirpation of the Uterus for a Myoma.*—Dr. Wm. Gardner exhibited the specimen of a large myoma on the posterior wall of the uterus from a woman, aged 50, who had been suffering from profuse hemorrhages, having bled almost continuously during the summer. He had diagnosed the tumour several years ago, and its growth had been slow. There was nothing peculiar about the case, but he wished to speak of the method of operation. He had removed every part of the uterus through the abdominal incision by the method explained in detail at the last meeting of the Society. He had used catgut for ligatures, and considered that it had great advantages in pelvic surgery. Silk ligatures may become infected from contact with the drainage, and act as a constant source of irritation until they come away, while catgut holds just as well, and if it should be infected by contact with the drainage-tube it is a small matter as it is so quickly absorbed. He thought that the severe pain so often complained of after the removal of the appendages was due, to a certain extent, to the persistent constriction of the pedicle by the silk ligature.

Dr. Alloway assisted Dr. Gardner, and thought this method would be the one of the future. The operation would be very difficult if the abdominal walls were large and thick. Another disadvantage was the enormous amount of physical endurance required on the part of the operators, for the operation was undoubtedly the most difficult in pelvic surgery, but it offered the great advantage of leaving no sloughing behind.

Dr. Mc Connell did not agree with Dr. Gardner's explanation of pain after the removal of the appendages. He did not think that the constriction of the ligature could last long enough to produce the pain.

*Tumour from Oviduct of a Hen.*—Dr. Mills exhibited the specimen of a caseating tumour about the size of a large turkey's egg which he had removed from the oviduct of a hen. The hen had been out of sorts for several weeks and the tumour had been discovered, the whole process lasting about eight weeks. This apparently rapid growth corresponds with the period of growth and development and the short period of usefulness of a hen's life.

*A Case of Meningitis following Middle Ear Disease.*—Dr. Springle read the history of this case, as follows:

The patient, a female 35 years, gave a history of suppurating disease of the right ear for some years past. More or less acute pains on that side of the head were supposed to be of a neuralgic nature. These are always relieved when discharge took place from the ear. One day in June last the patient began to suffer from pain over the right side of the head, which subsided towards evening, and the patient enjoyed a good night's rest. At three o'clock in the afternoon of the following day she was seized with violent pain in the above situation; this was followed by violent general convulsions, and when the patient was first seen the case presented the characteristics of a most violent attack of meningitis. The condition lasted for twelve hours from the time of onset, and the patient died. At the autopsy, the dura was found to be adherent intimately to the calvarium. A condition of acute meningitis obtained. A perforation measuring 10 mm. from the internal auditory meatus. A further examination of the body was not permitted by circumstances. This is to be regretted, as a soft blowing systolic murmur was to be heard during life over mitral and aortic areas of the heart. This condition was observed in a similar case before this Society, some two years ago, in which some suspicious of ulcerative endocarditis were entertained.

The President said that whenever fatal symptoms have ensued so rapidly on chronic ear disease, death has uniformly resulted from diffuse meningitis. He had never seen the more chronic form. It is quite consistent to assume that there may have been a previous localized meningitis from which the patient recovered. We never know how far a lesion extending from the ear to the cranial cavity has gone or will go. Such a rapid case as this one is rather rarely met with.