

satisfied that no other known means would have answered as well.

Paper read before the Canada Medical Association at Niagara on the 6th August, 1874, by JOHN MULLIN, M.D., Hamilton, Ont.

DUPLICITAS MONSTROSA.

The mother of this monster was 21 years of age and has generally enjoyed good health, the only illness of moment since childhood having been an attack of confluent small-pox in April 68, from which she made a good recovery, without medical treatment. Married about two years, in Feb. 73 was delivered of a healthy well formed male child, since has enjoyed good health.

The last pregnancy has not presented any peculiar features, the labour pains began early in the day, having been preceded by irregular pains thro' the night and day previous. In my absence she was visited by Dr. Woolverton who found the os well dilated and the bag of waters low in the pelvis, after the waters escaped, the head presenting in the 1st. position, descended slowly, and at length was delivered, the body failed for a short time to follow, and it was found on passing the finger to the axilla that some peculiarity existed, it being very difficult to reach the axilla; after a short time the shoulders were delivered, and some force had to be used to deliver the remaining part. It was found that the difficulty arose from the presence of a second head which in delivery was bent upon the thorax and abdomen. The head first born was very livid; a slight effort to breathe was made after the delivery of the second head.

The drawing was made by Wm. Leggs, Esq., and conveys a fair idea of the appearance of the monster. A short time only was allowed for the examination and the following notes were taken:—The child is below the average size of the fœtus at full term. On exposing the sternum it was found composed of two sternums the manubria of which are separated above by the coalescence of the upper ribs; each sternum has the articulation for two clavicles, proceeding downward the two bones are united and consolidated together. The outer clavicle of each thorax was normal in position and form, as were the corresponding scapulae and arms, the inner clavicles were thrown upwards and backwards to meet their scapulae. These clavicles, as well as the corresponding arms, were smaller than the outer ones. The adjoining scapulae which are here presented were uni-

ted at the lower part of the anterior borders. The outer ribs of each thorax were normal; the upper



five inner ribs of each proceeded from the spines upwards and forwards to the corresponding sternum, and near their sternal end formed a cartilaginous ridge. The sixth inner rib was short and united to the same rib of the other chest; the remaining inner ribs were very rudimentary, and consolidated forming a bony ridge between the lower dorsal spines.

The spinal columns were widely separated above, below they approached and became one by the coalescence of the pelvic bones, the vertebral canals however were distinct. The left-spinal cord was exposed, the nerves proceeding outwards were normal, those passing inwards smaller, especially towards the lower part of the cord, where they were quite rudimentary. The crania were not opened. The common sternum having been removed immediately underneath were the pericardia, quite distinct, by a partition formed by the serous lining of the two sacs. Each heart occupied nearly a normal position. The left heart was larger, and better developed than the right, the only peculiarity being a common opening for the venal cavity into the auricle, and the foramen ovale was large, the valves were normal. The right heart was imperfectly developed, the only septum between the auricles being a small free band of muscular tissue about 1-16th of an inch wide, the two