

of ovarian multi-locular cysts. The cells forming this infiltrating tissue were as follows, viz. : 3, spindle-celled, 3 mixed round and spindle, 1 large round, and 3 in which the form of cell was not mentioned. In the two cases reported by Pffannenstiel and Simoff, both sarcoma and carcinoma were seen in the same tumor. Melanotic sarcoma is the rarest form of disease affecting the ovary when it is primary, being much more often observed, comparatively speaking, in the external genitals. This is probably due to the fact that pigment is normally present in that region. Out of six cases of melanotic sarcoma of the ovary collected by Basso⁶, only one was primary.

In my own series, one was of the small round celled variety, in one the cells were oat-shaped (in this case there was also carcinoma present), and five were composed of spindle-shaped cells. One of the latter was a true solid fibro-sarcoma. Five of the tumors were primary, of which one was that one associated with carcinoma, and two were secondary, both ovaries being affected in only one instance.

The size of these tumors varies from that of a cricket ball to one almost filling the entire abdomen. In one of my own cases, the growth measured 74 x 67 cm. in circumference and weighed 5,140 grammes.

The tumor is glistening on the surface and of a bluish-white congested appearance and somewhat mottled. The vessels running over its surface are congested looking and numerous. It is usually lobulated and of an irregular consistence, feeling dense and solid in some spots while in others it is soft. The wall is, as a rule very friable, allowing a soft, dull-looking, brain-like substance to escape. When, however, the growth is of the fibroid variety it is very hard, but here also it is apt to be friable.

Symptoms.

In the earlier stages it may have very few symptoms but these soon appear.

It has little or no effect upon menstruation, but when this is affected the flow is increased in amount and becomes more or less painful.

It apparently affects multiparæ and nulliparæ equally and may be met with at any age. The very young, however, are especially susceptible to it. Doran seeing it affecting both ovaries in a seven month foetus. Sutton reports sixteen sarcomata out of sixty ovarian tumors in children. The first period of exceptional liability ends at puberty, and the second extends from 25—45 years. While it is usually bi-lateral in children, it is more often uni-lateral in adult life.

Pain may be an early symptom. This may simply be a "down-bearing" sensation or sharp and lancinating in character, this being the more common. In my own cases, pain induced the patient to seek advice