

There was still retention of urine, fever and vomiting, full doses of morphia being necessary to relieve pain. The diagnosis was probable ovarian cyst, with peritoneal inflammation.

Operation on the 4th February, 1887, Dr. Alloway assisting and Dr. Gurd giving the ether, the Hon. Senator McMillan of Alexandria, Ont., being present, as also four medical students. Median incision three inches long. Universal, but not intimate parietal, omental and pelvic adhesions. The cyst wall, on being exposed, presented a greyish-black appearance. On tapping it a creamy thick fluid, at first supposed to be pus, flowed out, but on cooling it became solid, while the escape of hairs promptly revealed the dermoid character of the tumor. On delivering it the pedicle was found to be very long and thin, and rotated three times from left to right. After ligature and removal of the cyst, the right ovary was found to be enlarged to the size of a pullet's egg and cystic. It was also removed. The cavity was thoroughly washed out with warm water, and drained. Recovery was easy and uninterrupted, save for a mild attack of phlegmasia of the left lower limb. The temperature reached 100° only once, and that was when the phlegmasia was at its worst. The patient left for home on the twenty-second day after the operation. The cyst contained a bunch of long hair and three teeth, one a perfectly-formed molar. There were also thick bony plates in the cyst wall.

The interest of the case here recorded lies in the axial rotation of the tumor, which led to obstructed circulation, with the sudden and alarming symptoms narrated. Such an accident is well known to all ovariologists of much experience, but there is much reason to believe that the members of the general profession who are first consulted by the majority of such cases are not as keenly alive as is desirable to the possibility of such an occurrence, or to the necessity of prompt operative interference to save the life of the patient. All authorities agree that the dermoid cyst is especially liable to this accident, which, however, may occur to any ovarian cyst with sufficiently long pedicle. It would be unprofitable here to discuss the various theories as to the causes of this dangerous accident. There is still much