nounced it to be an intra-canalicular fibroma. The curious folded appearance of this tumor is due to pressure from the growth taking place within the breast ducts. The patient was discharged from hospital in twelve days with the wound perfectly healed in two dressings.

## Yospital Reports.

## MONTREAL GENERAL HOSPITAL.

CONDENSED REPORTS OF CASES IN DR. MACDONNELL'S WARDS.

(Prepared by R. E. McKechnie, M.D., House Physician.)

History of Gout; Hypertrophy of the Heart and Valvular Disease; Anasarca; Albuminuria; Weir Mitchell pulse sign; Uræmin Coma; Cirrhotic Kidney.

S. D., aged 65, was admitted to the wards on June 21st, 1890, under Dr. Geo. Ross, and was subsequently transferred to Dr. MacDonnell's care. He had been suffering for three weeks from swollen joints of the hands, feet and knees; but the pain had not been severe enough to cause him to desist from his occupation as an apple-pedlar. Three days before admission he was seized with severe precordial pain, a sense of oppression in the chest, and shortness of breath, and soon after the legs, scrotum, and penis became greatly swollen. At the age of seventeen he suffered from an acute joint affection, which was sudden, occurred in the early morning, and was very severe. Pain was felt in the proximal joint of the right great toe. The small joints of both hands and feet were afterwards involved, and the patient did not fully recover for nearly five weeks. There had been a recurrence of these attacks every five or six years until he was about fifty; and they have occurred much more frequently since. The joints of the fingers did not become permanently swollen until middle life. The clows and shoulders have been occasionally involved. The patient has been engaged as a distiller till recently; has always been a hearty eater, and has probably been intemperate. His father died of gout at 57; his eldest brother had his first attack of gout at 30; and his father's