SOME VASCULAR ANOMALIES.

In the same subject, from the first part of the right subelavian artery, a large branchial artery was given off, which passed down behind the aortic arch to reach the bifurcation of the trachea. I have several times seen this artery; on one occasion it reached the descending aorta with which it communicated, and I looked upon it as a persistence of the right aortic root.

III. Double Inferior Cava.

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a or In this case the external and internal iliae veins of each side united to form a common iliac vein. The left vein passed up on the left side of the aorta and joined the left renal vein, the right iliae vein took the usual position of the inferior cava. These cases are not very uncommon, and I have seen quite a number of examples of this anomaly. Frequently there is a large transverse branch between the two iliacs. These cases of double inferior cava are examples of the persistence of the lower part of the eardinal veins.

IV. Misplaced Left Kidney with Abnormal Blood Supply.

In this case the misplaced kidney was situated between the two common iliac arterics. The hilus was placed anteriorly in the centre of the kidney, which was small and of an irregular discoid shape. It received its blood supply from a large artery which came off from the aorta at its bifurcation. The left renal vein emptied into the left com mon iliae and received the left spermatic. The left supra-renal capsule retained its normal position, and was of large size; it received its blood supply from the left spermatic artery. A similar case was reported in the January (1889) number of this *Journal* by Dr R. B. Mahon.

V. Multiple Renal Arteries and Veins.

In this subject both kidneys were placed at a lower level than normal, and reached to the intervertebral substance between the 4th and 5th lumbar vertebræ. The hilus of each kidney was situated in front. The right kidney had three veins going from the hilus to join the vena cava. The left renal veiu was of large size and divided into two branches, one of which passed beneath the aorta. A vein of some size united it to the left common iliac¹ veiu, whilst another still larger passed for the branch which went over the aorta to the splenic vein. Each kidney, in addition to its normal artery entering the hilus from the aorta, received a branch at its extreme lower end from the common iliac artery of that side.

NOTE.—All the anomalies above described are in the Anatomical Museum of M'Gill University.

¹ This was probably the remains of the lower part of the left cardinal vein.