

the abdomen and that he has almost continual nausea. He insisted on me cutting down and seeing what the matter was, so on March 29th, having prepared patient as if for a radical cure of hernia, I cut down over the thickening in left inguinal canal and found a thin sac with a narrow neck continuous with the internal ring and the peritoneal cavity. In this sac was a small piece of omentum tightly grasped by the internal ring and attached to the lower end of the sac, which as it emerged from the canal was somewhat large, the whole being the shape of a Florence flask. The lower part of the sac was closely adherent to the tunica vaginalis. Closely adherent to the posterior surface of this sac was the cord, which was spread out considerably, the vas deferens being some distance away and internal to the vessels. The sac was opened, the omentum tied off and the sac closed by catgut ligature and cut off below this. As the external ring was rather large its columns were brought together with two strong catgut sutures and the omentum sutured with horse-hair. No drain used. The patient recovered rapidly, the wound healing by first intention. Since then I have heard from him and he says he has now great comfort, no more pain or nausea, and he feels like a different man. This was no doubt a case of unobliterated funicular process into which omentum has been forced during his first attack of colic, and this dragging on the omentum accounted for all the pains and nausea he had suffered from for years.

CASE II.—*Swelling in left inguinal region and scrotum simulating hernia—Operation—Cure.*

Thos. H., æt. 21, was admitted into hospital May 16th, 1895, complaining of a swelling in the left groin and scrotum, which at times pained him severely.

*History.*—In December, 1894, following a strain, patient perceived a swelling descending into the left side of the scrotum about the size of a pigeon's egg; he had severe pains in the groin and back. These pains disappeared and he returned to work and found that whenever he put forward the left leg the pain returned, while at rest the pain disappeared. In the morning the swelling would have all disappeared. At first the swelling disappeared entirely for a week, then returned when he went about and disappeared slowly on lying down—that is, he went to bed with the swelling well marked and on waking in the morning it had disappeared; on rising it took some hours before the swelling reappeared and was its proper size. After a time the swelling ceased to pain him, and it was not until he began to play football in March last the pain returned severely and he consulted a doctor who told him it was probably a rupture. He tried to reduce it, but