

tion to the last possible moment, on the ground that the patient ought to be permitted to enjoy life as long as she could. But the fact is, that the patient cannot enjoy life with such a tumor. Its presence makes her utterly miserable, and after it has attained a certain size the sooner its removal is accomplished the better; not only because of the inconvenience and suffering which she will be spared, but because her chances of recovery will be much better than if it is postponed too long. The tumor in the present case now, no doubt, weighs twenty-five or thirty pounds, and it is high time that it should be gotten rid of.

I feel almost certain that double ovariectomy will have to be performed here; and for the reason that the patient has not menstruated for eleven months. The fall, certainly, had nothing whatever to do with this, for women are continually meeting with all sorts of accidents and injuries, but they go on menstruating just the same if the ovaries are healthy. It is the cystic degeneration of these organs, and not the fall, which has put a stop to this young woman's menstruating.

CYSTS OF THE UTERO-VAGINAL GLANDS.

Mrs. Ann R—, thirty years old, has been married three years, and has had one child. This is a very acute case compared with most of those that we meet here, as she says she has been sick only eight days. Eight days ago she began to suffer intense pain, accompanied with a burning sensation, whenever she attempted to pass urine, and yesterday she noticed, for the first time, a lump gathering within the vulva. This is the history.

One of the great advantages of a clinic like this is, I think, that many of the cases which you see here are likely to present themselves to your minds when in the future you meet with similar ones in your own practice; and it may be that many years from now the memory of some special case here at the clinic may enable you to successfully treat one of the same character which you then meet with for the first time yourself, and which might have otherwise proved a puzzling one to you. Thus the present case may fix itself in the memory of some of you, just as one that I will now mention did in my own. Twenty years ago a lady from the South consulted me for aggravated dysmenorrhœa; the pain coming on during the first day of the flow and being excruciating. It was before the days of the hypodermic syringe, and her suffering was so agonizing that nothing seemed to give her much relief. After remaining in New York for a number of months without receiving any permanent benefit she returned to her home in the South, where some time afterward her physician removed a small fibrous polypus, hanging by a pedicle from the uterine canal; and after that she had no further trouble. The explanation of the case was, that this little fibroid, being comparatively free in the cavity, had acted like a ball-valve in preventing the

escape of the menstrual blood, and thus set up the uterine contractions which caused the patient such extreme pain. Gradually, the fibroid worked itself downward along the uterine canal, until it was finally extruded from the cervix, when its removal became a very trifling matter.

Since then I have never met with a case in which the symptoms were quite the same as in this case until this very day, when a lady came to my office who suffers in precisely the same manner. Whether the trouble is due to the same cause I do not know; but, with the experience of the other case in mind, I shall at all events take the precaution of dilating the cervical canal with sea-tangle, and examining to see whether there is not such a fibrous polypus present; and it probably would not have occurred to me to do this if I had not come across the other case twenty years ago.

In the case now before you which, perhaps, may recur to some of you many years from now, there is a cyst of considerable size under the right *labium majus*, which is excessively painful to the touch; and under the left arm there is a similar, though smaller, cyst.

So much irritation have these cysts caused that there is now quite a severe vulvitis in consequence. If you did not make a correct diagnosis, this case might give you a good deal of perplexity; but, if you recognize its true character, you would find it one of the most curable cases to be met with in practice. These cysts are due to a degeneration of the vulvo-vaginal glands, whose excretory ducts have been closed by inflammatory action. The vulvo-vaginal glands were first described by Bartholinus, after whom they are often called; but, strangely enough, his description was lost sight of for a long time, and they were rediscovered, as it were, by M. Huguier, of Paris, in 1841. When they become inflamed vulvitis, urethritis, and more or less vaginitis, are the results, as in this case, and coitus becomes utterly intolerable. In this condition all sorts of lotions and soothing applications are often ordered; but such treatment is absurd, for the reason that the ducts of the glands, as has been mentioned, are closed by the inflammatory action. If we could probe them with the same skill that the oculist does the lachrymal duct, good results might perhaps be secured by the operation; but I have never heard of such a thing being done. The treatment that I unhesitatingly recommend in such cases is to snip off a section of the cyst (having first anæsthetized the patient), and then stuff it with carbolized cotton. This cures permanently, because the gland soon disappears entirely after the operation. The French writers advise dissecting out the gland; but the great objection to this procedure is that a branch of the pudic artery is very likely to be severed in it, and as the artery lies very deep under the ramus of the pubes it is difficult to control the hemorrhage that results.—*Medical and Surgical Reporter.*