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Original Communications.

CASE OF TUBAL GESTATION.

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In the November number of the "RECORD" for 1882, I reported a case of Interstitial Gestation which terminated fatally at the end of the second month, from spontaneous rupture of the sac; perhaps the following brief history of a case which ran through and beyond the full period of ordinary gestation may not be uninteresting.

Mrs. C., æt 35, a middle-sized, intelligent woman, with a healthy physique, who had been married many years, but had never had any family and had never miscarried, consulted me on the 4th June, 1885, suspecting that she was *enceinte*; catamenia (which, as a rule, were always pretty regular) ceased on the 4th March; all the usual signs of pregnancy were present, and with the exception of the abdomen being very much larger than is usual at so short an interval, there was nothing to indicate its being anything more than an ordinary case. I considered her to be pregnant, but that there might be a tumor of some kind in addition, and I advised her to wait patiently the course of events. I saw her from time to time, and she continued to increase in size, and the first week in August she felt foetal movements. On the 4th October she again consulted me, having most unfortunately contracted syphilis, which yielded to Iodide of Potassium (she was not mercurialized); but she rapidly lost flesh, the abdomen increased greatly in size, but the "swelling dropped," re-

peated digital examinations failed to reach the os, nor could a sound be passed; but early in October foetal movements could be distinctly felt and seen, and the foetal heart heard. She suffered the first week in November from a sharp attack of subacute peritonitis, which left her very prostrate and very much emaciated, and she became subject to attacks of most acute pain which were only controlled by Hypodermic injections of Morphia, there had been for some time lacteal fluid in the mammæ, she also complained of "crackling in her inside like the crackling of parchment." I came to the conclusion that it was a case of Interstitial Tubal Gestation, and asked Mr. Alban Doran to see the case with me, which he kindly did on several occasions, on one of which he succeeded in reaching the os and finding the uterus empty, it was decided to wait until the ordinary nine months elapsed, and she was removed to the Samaritan Hospital, on the 17th February. Sir Spencer Wells kindly met us in consultation, and it was decided to operate as soon as a bad bed sore, which she unfortunately had, should be somewhat improved. The operation was performed on the 26th March, 1886, and on opening the abdominal cavity, a large tumor was exposed, with a shiny, smooth surface of a dark red color; it was tapped but neither fluid nor blood escaped. Fearing that the tumor might be a malignant growth, and as no fetus could be felt through the anterior wall of the tumor, Mr. Doran, assisted by Dr. Bantock, cleared away adhesions, which were very intimate posteriorly; in so doing the transverse colon and sigmoid flexure were lacerated, and required suture. The cyst, when raised, burst on its right side, and