

the ensuing July, and the patient in August began to leave his bed; the idea of the cancerous nature of the tumors therefore was abandoned. On the 22d September there was a temporary relapse, and on the 28th September severe pain in the abdomen and dyspnoea, with great tenderness of the upper tumor. The patient recovered again somewhat, but the symptoms fluctuated more or less till the 18th October, when there was a sudden fall of temperature of the body, contracted features, cold sweats, small, slow pulse, quick breathing, increasing collapse, and death on the 20th October. We only note the prominent points observed in the autopsy twenty-nine hours later. In a pulmonary artery of third order, of the inferior right lobe, there was an echinococous cyst of the size of a pigeon's egg; the remains of echinococci were found in the branches given off from this artery. Pleura healthy; pericardium distended up to the second rib, containing four ounces of a purulent fluid. The parietal layer was thickened and covered with yellowish-red villi; the visceral layer was  $1\frac{1}{2}$  line thick; the heart reduced in size, its tissue pale and very friable. At the base of the pericardium there was a perforation with thin, smooth edges, which was covered by the heart, and which passed through the diaphragm, establishing a communication between the cavity of the pericardium and the epigastric tumour; the perforation was blocked up by a small echinococous cyst which had got wedged into it. The left lobe of the liver was almost entirely replaced by a large hydatid tumor of the size of a child's head, containing numerous subdivisions with echinococci; otherwise, there was no marked derangement in the liver. The upper third of the spleen was occupied by a hydatid tumor of the size of a fist; in the retro-peritoneal space between the diaphragm and the stomach were three similar tumors of the size of apples: six were also found, from the size of a walnut to that of an apple, in the omentum. Between the psoas and the posterior surface of the cæcum was one of the size of a fist; a cylindrical one, three inches long and one broad, lay across the hypogastrium; above fifty were scattered over the mesentery, and two lay under the serous investment of the vermiform process. The intestinal mucous membrane was normal, there was no ascites, and nothing marked about the kidneys.—*British and Foreign Medico-Chirurgical Review.*