ference as the only means offering a chance of life. When the peritoneum was opened masses of thick tenacious, jelly like substance escaped with blood clots; the tumor lay so far to the left that it could not be touched; the wound was then enlarged to five inches, the tumor could not then be brought into view until some of the inflamed and distended bowels had escaped. A trocar was passed into the black tense cyst when brought to the wound, but nothing flowed through it, the tumor was then slowly drawn out and in doing so a cyst upon the anterior and superior surface of the tumor was seen discharging its contents, which were similar to what had escaped from the abdominal wound. The pedicle was then untwisted and a ligature applied with the Staffordshire knot, the tumor was then cut away. The first ligature slipped and had to be replaced by three separate ligatures. Sponge after sponge was then removed loaded with jelly-like substance and blood. The patient showed signs of collapse and washing out of the abdominal cavity could not be done; some difficulty was experienced in returning the distended bowels, a drainage tube was left in, and the wound closed with stitches very closely applied. The patient recovered from the shock, but died in thirty-six hours, delirious; temperature in axilla, two hours before death, 1063°F., nothing could be sucked through the drainage tube after the first four hours, so it was removed. He stated that this was the second case of strangulated ovarian cyst that he had met with; that out of three cases of ovarian or par-ovarian cysts seen in two years, two of them were thus complicated. The first case of strangulated ovarian cyst which was successful he had reported to the society in 1884. From this experience one would be inclined to infer that strangulation was not an uncommon event in the history of ovarian diseases, this, however, is not the case, as in Mr. Lawson Tait's first 100 ovariotomies he had only once met this complication, and many ovariotomists had never met with this unfortunate complication. This case, he thought, was peculiarly interesting. It occurred on the left side, whereas by far the greater number of cases are right-sided. To his mind it completely refuted Mr. Lawson Tait's theory with regard to