opiate and retired, expecting, however, to be called up before morning, as this visit was made early in the evening; but, to his astonishment, when morning came the patient was quite free from pain.

A few days subsequently there was a free secretion of milk, which continued several days, and was with difficulty arrested.

For a month or six weeks the catamenia appeared, and occurred regularly for nearly four years; then free hemorrhage, which lasted several days, the patient passing large clots of blood. The hemorrhage gradually ceased, nor was there, after this, any discharge from the vagina, nor any vicarious menstruation.

I first saw the patient on the 10th day of May, 1867; found a large pyriform abdominal tumor occupying the median line, perhaps a little more prominent upon the left side, and extending an inch and a half above the umbilicus; it seemed solid and of but slight mobility.

The patient was apparently laboring under an attack of peritonitis; there was intense soreness over the entire abdomen, fever, red tongue, occasionally profuse perspiration, etc. But under the influence of opiates, hot fomentations, and subsequently tonics and nutritious diet, she rallied and was able to be up most of the time.

Subsequently she had chills, fever and sweating, and the tumor appeared to point on the right side, about two inches and a half lower than the umbilicus, and about the same distance from the median line.

After having become fully satisfied of the adhesion of the peritoneum to the abdominal walls, and there seeming to be fluctuation in the enlargement, an exploring needle was introduced, and an offensive liquid and gas escaped by the groove of the instrument. The patient being at this time very weak—indeed, extremely prostrated—and averse to any further surgical interference, it was deemed best to relinquish all attempts at further investigation until she should again rally. She was ordered stimulants in increased doses, anodynes, tonics and nourishing diet; in short, a general supporting treatment.

Under this course the patient improved somewhat in strength. Soon the tumor again become more prominent, and increased in size. It was now cut into with a sharp bistoury, an incision of three-fourths of an inch being made; a considerable portion of gas and very thick, offensive fluid, so very offensive that one could scarcely stay in the room, were discharged. From this time there was a continual discharge until the patient's death, which occurred on the 4th of August, some four or five weeks subsequent to the time when the puncture was made. The patient was so very feeble—indeed, only living, as it were, from day to day, and was so unwilling to have the opening in the abdomen enlarged sufficiently to enable