

repeated three times at intervals of ten days, the vagina being meanwhile washed out thoroughly with Condy's fluid twice a day. At the present time, ten months since the treatment, there are no signs of return, and the uterus presents a normal appearance.

A case of pelvic hæmatocele, the result of an attempted abortion, presents some points of interest. The patient was admitted Nov. 29th with a history of having taken a considerable quantity of *oil of cedar* with the view of procuring an abortion. The dose taken was three drops, gradually increased at short intervals till a maximum of fifteen was reached. The immediate effect was severe pain, at first resembling labor pains, but shortly becoming more intense and locating itself directly over the uterus. The patient was presumably only six or seven weeks pregnant; whether she really aborted or not is a matter of doubt. On admission, she presented the following symptoms:—face pale and anxious, nose pinched, lips blue, breathing hurried, pulse 115 and small, temp. 102°, marked tenderness over the uterus, and a slight reddish discharge from the vagina. A digital examination per vaginam revealed nothing special, beyond the fact that the os uteri was very painful to the touch. The treatment ordered was: Pulv. opii gr. ss. every four hours, hot linseed meal poultices to the abdomen, and a hot vaginal douche four times a day. By the 5th December, six days after admission, the pain had greatly abated, but the abdomen had become distended to the size of a fifth month pregnancy, and there was marked dullness on percussion over the hypogastric and both iliac regions. The vaginal discharge had ceased, and digital examination revealed a decided bulging in Douglas' pouch; the temp. was 103.6°, and the pulse 118. On 8th December, the dullness on percussion extended as high as the umbilicus; the vagina was nearly obliterated by the distention of Douglas' pouch, and felt like the arch of a small diaphragm, through the centre of which the os protruded like a nipple. The temperature and pulse still continued high. On the evening of the 12th December, the hæmatocele burst into the rectum and discharged half a chamberfull of pus and blood. The next morning several smaller discharges took place, the temperature fell at once to the normal, the abdominal tumor rapidly subsided, and the general health began to improve. She was put upon tinct. fer. mur., and convalesced

so rapidly that on the 31st December she was able to leave hospital.

There were several cases of anal fissure treated by forcible dilatation of the sphincter, the results being entirely satisfactory. In one case of hemorrhoids, Pacquelin's thermo-cautère was employed with admirable results.

There were five deaths in the Institution during the year; one from cancer of the liver (already referred to); one from tubercular peritonitis; one from gastric ulcer; two from pelvic cellulitis.

*Obstetrical Department.*—The special cases are as follows:—*Twins* occurred three times; in two cases the sacs were separate; in the third case both children were enclosed in the same sac, and were attached to the same placenta by two separate cords. In two cases the children were males; in the third, one was a male, the other a female. In one case the breech and vertex presented; the others were all vertex presentations. In one case the labor was powerless, necessitating the use of forceps; the children were males, weighing 7½ and 8 lbs. respectively; the extraction of the second child caused a severe perineal laceration, which was successfully closed with silver sutures; a phlegmasia dolens of the left leg followed, but eventually the patient made a good recovery.

*Breech presentation* occurred three times, one being a twin.

*Prolapse of the Funis* occurred twice. In the first case postural treatment succeeded in replacing the cord; in the other it failed, and forceps had to be applied to save the child. In both cases the children were born alive.

*Forceps* were used altogether nine times. In three cases they were applied at the brim; in the first there was too early escape of the liquor amnii, with great rigidity and dryness of the tissues; in the second there was prolapse of the funis; in the third there was narrowing of the antero-posterior diameter. In the remaining six cases forceps were employed, chiefly for prolonged and powerless labor. Chloroform was administered in all cases of instrumental delivery. After an extended comparison of various kinds of forceps, Barnes' instrument has been adopted as the most serviceable and satisfactory.

*Adherent placenta* occurred in one case, necessitating the introduction of the hand for its extraction.

*Post partum hemorrhage*, severe in character,