

Prince Edward Island.

DR. R. MACNEILL, Associate Editor for Prince Edward Island.

BASSINI'S OPERATION FOR THE RADICAL CURE OF HERNIA.

It was with great pleasure that we witnessed the above operation, performed by Dr. Wm. Stewart, of Lexington Avenue, New York, on the first of the present month, in company with Drs. McLaren and MacNeill. The patient had the same operation performed on the left side about a fortnight previously, and did well. This time the right inguinal hernia was operated upon in a very clever manner by Dr. Stewart. He carefully dissected down to the sac, reduced the hernia, ligated the sac, cut it off so close that it will retract into the abdominal cavity. The internal oblique and transversale, muscle or conjoined tendon, were then sutured by six or seven sutures to poupart's ligament, the cord having in the meantime been drawn aside and carefully laid over these muscles—a new roof and a new canal, formed by stitching the skin to the superficial fascia over the cord, completed the operation, and the patient, who previously had a right and left inguinal hernia, is made happy by an operation which dispenses with trusses and all forms of sham applications that are only palliative at best.

The Doctor was assisted by Dr. Caldwell and Dr. John McKay, of New Glasgow, Nova Scotia, and others whose names escaped us. To Dr. McKay we are indebted for much kindness during our sojourn.

Dr. Stewart is also a Nova Scotian, who is fast earning laurels for himself in his profession, and a report of this and other cases from his own pen will doubtless greet us some day.

Original Communications.

EXTRA-UTERINE PREGNANCY.

BY J. BAUGH, M.D.

May 11th.—Was called to-day to see Mrs. M., aged 25, married. Had one child five years old. No history of any miscarriage. The birth of her child was followed by inflammation of womb and blood-poisoning. She was last unwell February

4th, but saw a little bloody discharge two or three times between that date and March 5th. On the morning of that day, a few minutes after getting out of bed, and while dressing, she was seized with violent pain in pelvic region, accompanied with vomiting and faintness.

Sixty-seven days subsequently I was called to see her. During that period she had been attended by a number of medical men, and morphine had been prescribed to relieve the constant pain. I found her in bed, suffering intensely. Her face was ghastly pale, wan and anxious. Vaginal examination showed a soft, tender mass filling the right iliac fossa, pushing the uterus to the left. She complained of as much pain in left as in right side, due doubtless to uterus pressing on the ovary on left side.

May 12th.—Patient sent to city hospital, and phenacetine, exalgine and belladonna substituted for morphine.

May 13th.—Patient examined under chloroform, Dr. McCabe being consultant, and diagnosis of ectopic gestation confirmed. Friends of patient informed that an operation would have to be done, and their consent obtained. Acid mur. dil., quinine and digitalis prescribed.

May 18th.—Patient again examined under chloroform. Nothing new discovered. Appetite and general condition improving.

May 21st.—Drs. Mallock and Miller saw her with me. Differed from me, and advised expectancy.

May 22nd.—Patient's condition not so good. Suffering more pain, and tumor had increased in size very perceptibly during last six hours. Decided to operate next morning.

May 23rd.—Lower part of abdomen had become very much distended during the night. Pulse 120—very weak. Operated immediately. On making section, a frightful amount of blood and clots rushed out of the abdomen. Having broken through the omental and intestinal adhesions, a male foetus six inches long was found lying in the right iliac fossa, connected with its placenta by a cord seven inches long. The placenta is five inches in diameter. Its attachment was the posterior layer of the right broad ligament, floor of pelvis and posterior uterine space, where it was thickest. The right third of it was found