

There seemed little doubt that the tumor correctly diagnosed was the kidney. Two silk sutures were passed through the deeper portions of the edges of the wound, the stitches were made to penetrate a portion of the muscles and the lumbar aponeurosis in the lower edge of the wound; they were then carried through the renal capsule and on through the deeper tissues of the upper edge of the wound. These sutures were tightly tied, the wound was thoroughly irrigated and the superficial portions of the wound were brought together by means of several points of suture. The superficial parts surrounding the wound were thoroughly cleansed and a Keith's dressing applied.

During the subsequent course of the case the temperature remained normal; there was no pain and the dressing applied at the operation was not removed for three weeks when the healing process had been completed. The sutures were removed and a pad was bandaged on over the abdomen anteriorly.

June 8.—There is no tumor to be felt where it had formerly been observed. There is slight tenderness on deep pressure over the kidney.

*Remarks.*—The condition of movable kidney is more common in females than in males. Pregnancy has a great share in its production. In men, however, injury may be the cause; thus Henry Morris states that "in many instances the immediate cause of the mobility has been of a traumatic nature, such as a blow or a kick on the loins, a jerk, or some severe or sudden concussion."\* The history of traumatism in the case just narrated is worthy of note as a very possible factor in causing the condition. Disturbance in function of the stomach and large intestine are usually more marked than in the present instance; the gastric trouble has been attributed to the dragging or pressure of the kidney upon the middle portion of the duodenum.

The diagnosis from the physical signs in the case was extremely difficult; the position of the tumour led one to suspect gall-bladder. Further, cases have been reported in which a distended gall-bladder has been mistaken for a floating kidney. Thus Mr. Lawson Tait records a case of distended gall-bladder, operated on by him, which had been pronounced a floating kid-

ney by several distinguished authorities\*, and the same authority is quoted by Morris in saying that out of thirteen cases in which the diagnosis of movable kidney was wrongfully made, seven were proved to be distended gall-bladder, four ovarian cystomata with long pedicles, and two were tumors of the pancreas. The shape and size of the tumor in the case under consideration pointed more to kidney than gall-bladder, and a resonant percussion note could be elicited which would have been impossible had the distended gall-bladder been the cause of the trouble.

It is noteworthy that in this case there was no drainage tube inserted in the wound, which was completely closed by suture; the antiseptic details had been thorough, and healing took place without the formation of pus, the occurrence of tension or rise of temperature. The dressing applied on the operating table was not removed for three weeks, when healing was complete.

Nephrorraphy has been attended with such successful results in the past, that the operation is to be advocated.

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## Clinical Notes.

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### HERNIA OF OVARY.

BY JAS. A. M'MAHON, M. B. TOR., ST. CATHARINES.

April 1st, 1890. I was called to see Mrs. M——. I found she had considerable peritonitis, the pain being greatest over the site of the left ovary. She did not progress as well as I expected under the administration of the morphine, and on April 4th she was worse. On questioning her further, she said that she had a lump in the left groin which, from motives of delicacy, she had not before admitted. On examination, I found a pyriform tumor situated in the left labium majus, which was hard and extremely painful. She said that it had been there for about five weeks, that it was painful at all times, and particularly when standing for any length of time or walking, but that it had become larger and more painful the last two days. She also told me that during her previous menstrual period the lump has enlarged and become excessively painful. Her bowels were regular, but there was some little pain on defecation. When the tumor was manipulated

\* Surgical Diseases of the Kidney. Henry Morris, p. 30.

\* Edin. Med. Journal, October, 1889, p. 514.