border of the right rectus muscle there was a slight upheaval of the abdominal wall. Palpation revealed the existence of a welldefined pear-shaped tumor, giving the sensation of deep fluctuation, which was very dull on percussion, while slight pressure caused severe pain and vomiting.

It was evident that the patient was suffering from toxæmia due to retention of bile, and that the tumor was a distended gall-bladder. The administration of phosphate of sodium for a few days was recommended, and it was further suggested that if relief were not afforded within that time, the urgency of the symptoms, together with the existence of a tumor, rendered an exploratory incision not only justifiable, but expedient, in order that the gall-bladder might be dealt with surgically if found necessary. The question of operation was mentioned to the patient, whose sufferings were so acute that she readily expressed her willingness to submit.

Jan. 14th, 1890.-I saw no mere of the case until to-day, when I was again summoned by telegram, asking me to be prepared to operate. On my arrival I was told that for several days the patient had complained of pain over the upper part of the abdomen ; that on the previous night there was a very great swelling, with redness of the integument to the right of the rectus muscle, reaching as low as the umbilicus; and that no bile had been vomited for some days, although vomiting had been incessant and uncontrollable by cocaine and morphia. This swelling had been manipulated for the purpose of examination, and by the time I arrived it had almost disappeared and vomiting of bilious fluid had again taken place. There was, however, a great increase of pain over the upper part of the abdomen. Owing to the relief (?) which had taken place (i.e., the disappearance of the tumor) the weight of opinion was unfavorable to operation, especially as it was considered a case of malignant disease of the stomach.

Jan. 26th.—There having been no amelioration of the symptoms, and the patient having urgently requested operation, I was again sent for. The patient had lost ground, and as I found her sleeping soundly in consequence of a subcutaneous injection of