NOTES ON SURGICAL CASES WITH PATHOLOGICAL SPECIMENS.*

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In order to stimulate the interests of this asociation and to assist in making it a help in our work, I have consented to read notes on a few surgical cases of more than ordinary interest and to bring before your notice the pathological specimens obtained from those cases.

The cases dealing with gunshot wounds and the treatment of tetanus will afford the members of this association, I think, an excellent opportunity to state their experiences with these cases.

The first case is one of *Fibroid of the Cervix.* As you know, the occurrence of fibroid tumours of the cervix is rare. Of seventy-four cases of fibroid tumour reported by Lee, only four were in the cervix. On account of distribution, these tumours lead to difficulty in diagnosis, simulating when large, inversion and prolapse.

They usually give rise to symptoms on the part of the bladder and rectum and do not cause menorrhagia. In this case the predominant symptom was hemorrhage, the bladder and rectum being unaffected.

Mrs. J. W. consulted me in August, 1909, bringing with her a note from Dr. Dickie of Perdue.

She gave the following history:

Age 47; mother of six children, the youngest 17 years of age; easy labors. Menstruation began at the age of 12 years—21 day type—always regular. A half-sister died of cancer of stomach, otherwise family history was good.

Fourteen months prior to consultation she had a severe hemorrhage and again five months ago; no pain; no loss of flesh. Since last hemorrhage vaginal discharge all the time—red

*Read before the Saskatoon Medical Association.