

In reply to questions, DR. TRENHOLME said the woman's history did not indicate pregnancy, and that before operating her temperature was normal.

Several members who examined the debris gave it as their opinion that there were no foetal structures present. The bony piece was thought to be part of an ossified cyst wall. There was no sign of any of the long bones.

Sarcoma of the Testis.—The PRESIDENT exhibited the specimen and related the following history of the case: Patient, aged 48, had an attack of orchitis first in September, 1883; no cause could be assigned for this. He rode much on horseback in the woods, but there was no history of injury. In July '84, he had another attack of inflammation in that testicle, which did not reduce in size. Last October it became very bulky. There was no disease in the cord. He was anæmic. No history of syphilis. Had had gonorrhœa ten years ago. Iodide of potassium and mercury was given for a month. After this, Dr. Bell attended him through an attack of phlebitis of the left leg. Sarcoma of the right testicle was diagnosed. Dr. Roddick removed it, and a microscopic examination revealed it to be of the large round-celled variety of sarcoma. The tumor was as large as the fist. Slides prepared by Dr. Wilkins were shown under the microscope.

Large Intra-uterine Myoma.—DR. WM. GARDNER exhibited the specimen and related the case. Patient, aged 42, very pale, came to him with a history of severe hemorrhages for the past two or three years. No pain. An examination caused a great hemorrhage. The tumor could easily be felt in the hypogastrium, and by the vagina, in the uterus. After dilating well with tents, it was removed in pieces by means of the spoon saw. The operation lasted an hour and a half. Not more than five or six ounces of blood was lost. A good many shreds came away after. The uterus was thoroughly irrigated and drained with the double tubes. These were sutured to the lips so as to keep them in place. After eight days they ulcerated away, and were allowed to remain out for 24 hours, when the temperature rose to $101\frac{1}{2}^{\circ}$. The os was then opened, and three or four ounces of bloody fluid escaped. The tubes were again used as before. The patient made a good recovery. Dr. Gardner said that the irrigation was troublesome, but on it rests the success of the operation. Lawson Tait has lost 50 per cent. of these cases.

DR. TRENHOLME said he had removed several of these tumors and never lost a case.