

much for her. He intended to cauterize the diseased *os* and *cervix* every ten days, until cicatrization took place when he hoped to be able to report a happy *denouement*. He had mentioned the case because of its rather anomalous symptoms, and because he considered it a good example of reflex action, or rather suffering the excitation applied to the peripheral extremities of the nerves in the *os* and *cervix* being conveyed to the spine, and thence reflected as a sense of pain through the intercostal and abdominal nerves. He believed it to be a good plan whenever there is any obscurity about an affection occurring in a member of the "fair sex," (especially when the symptoms are different from anything you have been in the habit of observing in men), to suspect "something wrong" with the internal organs of generation. The adoption of this course had "stood him in good stead" more than once.

TUESDAY, February 6th, 1872.

Dr. Mack directed the attention of the Society once more to the subject of pelvic cellulitis, its suppurative termination had been fully discussed upon former occasions he now wished to draw attention to the termination in thickening and induration of the sub-peritoneal connective tissue, and vicious adhesions and contractions, from which so many mal-positions of the uterus, and embarrasements of the ovaries, directly resulted.

The diagnosis of this induration following cellulitis is not so simple or easy as might at first appear, especially if made without any history of the case, or knowledge of the fact of distinct cellulitis having pre-existed.

First: the changes produced by fibrinous exudation in peritonitis resemble in many respects, and even complicate those springing from perimetritis. The thickening from effusion into the sub-serous filamentous tissue, and from thickening and hardening of the membrane itself from development of new vessels in a loaded condition, or some new deposits on the free surface, is not so extensive or so hard, and does not communicate upon examination the suspicion of the existence of a tumour. The hard circumscribed patches detected under the abdominal walls, do not give upon conjoined palpation the well defined boundaries of a tumour—the margins being as it were lost in the sur-