THE CANADA LANCET.

the most of the time, but when she wakened occasionally, wanted the ice as usual. The ice was continued to the head during the whole night. The fever gradually abated towards morning; *she is noro free from fever*. The temperature is normal, $(98\frac{14}{2}^{\circ})$ Pulse 100, respiration 17. Did not vomit the medicine, and at 4 a.m., had a little brandy and iced water; complains of noises in her head, (owing to the quinine), and inability to see well-Permitted her to have a little black-tea, with cream and sugar, which she relished, and as the stomach now begins to crave for food, she is to be allowed some fluid nourishment by the mouth.

Washed out the drainage-tube with the syringe, but only two or three pieces of *debris* came away with the injected fluid. Gave eight grains of quinine in a little iced brandy.

I P.M.—She appears much better, has neither fever nor pain. Passed her urine without the aid of the catheter. Pulse 95, respiration 17, temperature $98\frac{1}{2}^{\circ}$. The ice to the head has been omitted since morning. Has had no opiate since yesterday evening. Has taken some egg and milk containing a little brandy.

10 P.M.—Continues to improve, she is cool, moist, and perfectly free from fever. Pulse 85, respiration 14, temperature 97¹/₈°.

28th, 9 A.M.—Still improving, states she feels hungry. The menses came on this morning. As flatus was becoming troublesome, the bowels were relieved by an enema of warm water.

During the next few days the drainage-tube was frequently cmptied and syringed out; on one occasion half an ounce of offensive pus was brought away, and several times *debris* of broken down tissue. But from the above date she continued to improve, with the exception of the 7th, 8th, and 9th, days, when she did not feel so well, as considerable suppuration occured in the sheath of the right rectus muscle. This, however, soon ceased, and her recovery was rapid.

REMARKS.—The chief interest, of this case, centres in the fact that the operation was followed by a *fever*, unaccompanied by any inflammatory symptoms whatever; and that this fever was controlled and arrested by the prompt administration of quinine, in large doses, bringing the temperature down from nearly 102° to below the normal (973°) , within 24 hours. The case also demonstrates the usefulness of the drainage-tube, through which the

pelvis was cleansed from decomposing materials, and septic absorption was thus probably averted.

CASE IV.—Multilocular Ovarian Tumor.—Extreme condition.—Tapping.—Rectal alimentation —Peritonitis.—Ovuriotomy.-Extensive adhesions. —Pedicle lizatured and secured with the wound.— Exhaustion.—Fatal result.

MRS. MCA, aged 42, married, the mother of six children, consulted me on March 10th, 1872, for an enlargement of her abdomen. Ten months previously she first noticed "a swelling low down on the left side," which increased rapidly during the next three months, and this she concluded was due to pregnancy. Her size then remained stationary for some time and she became doubtful as to the nature of her condition. During the winter months however, the enlargement again gradually increased. Upon examination, the abdomen presented the appearance of an eight months pregnancy. It was protuberant, irregularly uneven, and everywhere dull under percussion. Fluctuation was very distinct at the upper and right side of the tumour, while the left side and lower portion were hard and unvielding.

I informed the woman and her husband that I believed her enlarged condition was due to the presence of an ovarian tumor of a compound nature; and proposed a consultation for the purpose of making a more critical examination. This they considered, postponed, and declined; and shortly afterwards placed the case under the treatment of a notorious itinerant charlatan, hailing from Buffalo.

On Feb. 3rd 1873, eleven months from the former time, I was again requested to visit the patient. They then informed me that the charlatan had continued his treatment three months with positive assurances that he would cure her of the "dropsy," but finding she was losing flesh and strength she discontinued his treatment. In September having contracted a cold, she became very poorly and took to the bed, where she had been confined all winter. While her health has been failing the tumour has been increasing in size, so that now it completely fills up the abdominal cavity, pressing up against the liver, stomach, spleen and diaphragm so as to seriously obstruct the respiration. The girth of the abdomen at the umbilicus is 463 inches, and measurement from the ensiform cartilage to the pubes is 26 inches. She is now in an extreme condition ; BKA

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