the time which had always given her trouble before, but unfortunately lost it as the result of an accident at about the sixth month.

When a tumor of the cervix remains undiscovered until the onset of labor it causes trouble by preventing the cervix from expanding properly, or it may even prevent the head from entering the os. A fibroid in such a position is easily dealt with. A short and broad duck-bill speculum is used to expose the cervix, which is drawn down by blunt, double tenacula. The mucous membrane over the tumor is incised; the tumor may then be grasped with volsella, the mucous membrane peeled off from its surface, when the tumor may be separated from the cervical tissue, either by the fingers or by suitable scoops, and removed. The bleeding may not be troublesome, but if it shows any tendency to become excessive, it may be controlled by pressure made either directly by a plug, by compression forceps, or by the advancing head.

Fibroids in the body of the uterus give rise to much more difficulty. If the tumor is not large and is situated high up, it may not cause much trouble and may even not be suspected until after delivery, but even in such cases which are the mildest, there is always increased danger from hemorrhage.

If situated low down it is likely to obstruct delivery, though it gives rise to trouble in proportion to the degree of fixation. If it is subperitoneal and pedunculated it will give rise to no danger and will only annoy by its mechanical, obstructive effect. Obviously it will not cause bleeding.

An interstitial fibroid will not only give rise to difficulty by its mechanical, obstructive effect, but also by preventing the proper uterine contraction so necessary both for the expulsion of the child and for the separation of the placenta as well as the closure of the vessels, for if the placental attachment be on the surface of the tumor the vessels are not closed by the contraction of the uterus, but can only be closed by thrombosis.

Afterwards, during the puerperium, the tumor is a source of danger, producing an unnecessary flow of blood in that direction, increasing the bleeding from the endometrium and retarding the natural involution of the uterus—or even by its lower grade of vitality favoring necrotic changes and septic infection.

A submucous fibroid, if of fairly large size, may give rise to other conditions. By its presence it may irritate the uterus, causing contractions which in their turn may cause hemorrhage (accidental) or sloughing of the tumor itself, and in that way it may bring about infection.

After delivery of a child the tumor might easily at first glance be mistaken for the head of a second child. Dragging