

fetus between 6 and 7 months and a large placenta. The placenta was attached low down in the pelvis, was exceedingly friable, but came away without producing any hemorrhage. The walls of the sac were about 4 mm. in thickness and excessively friable. They reminded one very much of granulation-tissue. It is impossible to determine where the pregnancy took place, as the pelvic organs were entirely walled out. It is probable, however, that the uterus ruptured and that the fetus with its membranes



Fig. 1:—The drawing of course is somewhat diagrammatic. It represents a longitudinal section of the body. The fetus with the fetal membranes are lying immediately beneath the abdominal wall and are attached anteriorly to the peritoneum almost from the sternum to the pubes. (B.) At the umbilicus the fetal sac bulges into the hernial opening and at the most prominent point this hernial sac has given way, allowing the fluid to escape externally. At A numerous granulations have formed on the inner surface of the sac. The fetus is well preserved, appears to be about 6 months old and shows slight maceration on the face, on the arms and legs. The site of the placenta is roughly outlined by the dotted lines. The cervix is seen to be normal but on account of the marked distortion, the presence of the abdominal tumor and the oedema it was impossible to outline the uterus or appendages, hence their relation is left hazy. The bladder and rectum are in their normal positions. As will be seen from the drawing a median incision in the abdominal wall would open directly into the sac and in no way involve the general peritoneal cavity.

intact escaped. It have then become surrounding structures. This placenta, this la to the pubes and the abdomen was loosely packed. An incision was closed drainage. At the operation of by Dr. John M. Goldsborough and

Following normal to 101. has shown no ular for 6 days tone. The pain the escape of a gauze drain abdomen was disappeared. discharge. On to outline the about the size directly behind

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