

the non-conducting contrivance was slipped over, beyond the clamp, and the peduncle was slowly and carefully seared with the hot iron, by Dr. White, until it was severed. The peritoneal cavity, as far as it was exposed, having been carefully cleansed by new soft sponges, the intestines and peritoneum appeared very red. Upon loosening the clamp a large artery spouted, the clamp was immediately screwed up, and we determined to secure the peduncle a la Spencer Wells.

The edges of the wound were then secured, in apposition, by deep silver sutures, passed through the peritoneum, a sufficient distance from the margins. Dr. White, with the assistance of Drs. Aberdeen and Laing, now completely encased the abdomen with broad adhesive straps, and a retaining light bandage was applied.

After the effects of the chloroform had passed off, she appeared to be remarkably well, and spoke of the operation as a thing yet to be performed. Brandy and beef tea were directed to be judiciously and freely administered, a suppository of morphine, containing one-third grain was ordered, and Mrs. Eagan was left in the care of Doctors Clark, of Niagara Falls, and Aberdeen, of Suspension Bridge. These gentlemen paid due attention to evacuating the bladder at regular intervals, and nothing could exceed the kindness and assiduity of the attentions paid to her by Dr. Aberdeen.

Upon inspection the tumour proved to be a multilocular cyst, somewhat larger than an adult head.

After the completion of the operation the prospects of recovery were by no means cheering—taking into account the wretched appliances for the care of an invalid.

During the first few days a variety of alarming symptoms made their appearance, the pulse going up to 142. Coma, at one time, appeared imminent—tympanites and nausea frequently came on. Nourishment—soup injections, stimulants and enemata of ol. terebinth and tr. assafetida, suppos. morph., iced champagne, &c. were the principal remedies employed. On the fifth day pneumonia, in the lower lobe of the left lung, supervened, but yielded slowly to treatment. On the tenth day the clamp came away, and free suppuration in the region of the pedicle continued

for some days. Bed-sores, on the eleventh day, yielded, after eight or ten days, to the skilful treatment of the Surgeons in charge. On the thirteenth day she got out of bed, and walked to a chair; and now, after many "ups and downs," she is perfectly convalescent. Having recovered completely, from the effects of removing the tumour, while we have every reason to indulge the hope that the ascites will not return.

On this day (January twenty-fifth) I saw Mrs. Eagan, at her house, and I am happy to say that her convalescence is thorough. She walks about her house, sits up all day, and says that in a few days she will come, over to St. Catherine's, a distance of about 13 miles, to see me. The wound has perfectly healed; no symptom of dropsy is present, and under the guidance of Dr. Laing, who is at present attending her, there is no doubt that her days are likely to be as many as those of any other woman of her age.

NOTES ON A CASE OF PLACENTA PRÆVIA.

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While doing duty for Dr. Hamilton last October at the Bruce Mines, I had a case of placenta prævia, which from two or three points in it may be worthy of a place among obstetrical notes:

Mrs. S. N—, age 42, mother of nine children, twice married, with an interval of nine years between last child and date of present pregnancy. Had complained very much of pains in back and sides; left side worse than right, with general languor and depression. On October 21st patient had premonitory symptoms, which she described as "dull, heavy pains, deep-seated in the bottom of the belly." These by degrees assumed the character of labour pains, and during the night she found she had passed per vaginam a quantity of blood. I was sent for at once, and saw the patient at 3 A. M., October 22d. She had then lost a large quantity of blood, and was pale and weak. The labour pains had become very much weaker. On examination I found the os dilated about the size of a half dollar, and exceedingly rigid. The placenta was presenting attached to the right side of the uterus, so that I could with my finger detect the edge, covering two-thirds of the os. The patient was suffering consid-