

to its connection with the liver. From the inner part of the lower end projected slightly the gall bladder, which was normal and could not have had anything to do with the formation of the process.

CASE 3. A woman with process closely resembling that in Case 2. The gall bladder was not seen ; if attached, it was situated behind.

CASE 4. Mrs. F., the wife of a physician, was never robust. Her menses were painful and often profuse. She became ill in January, 1895. The flow was so free that it was thought that she had possibly miscarried. In a few days the temperature rose slightly, and tenderness and slight fullness were found to the right and behind the uterus, down close to the cervix. There was not much change in the symptoms for some days, then she

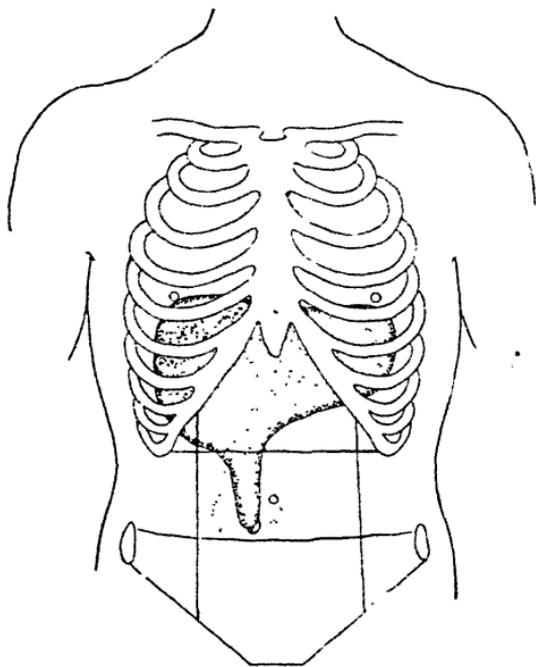


FIG. 2.

improved, the tenderness and fullness gradually disappeared with the discharge of a little pus beside the cervix. The temperature became normal, and she improved somewhat for a few days. Then fever returned again ; nothing could be found in the pelvis to account for it. The urine had been normal. In the right lumbar region there was some tenderness, and a fairly well-defined mass could be felt extending down nearly to the crest of the ilium. A few days later the urine contained some albumin, with a few pus cells. The temperature remained variable, but not high. Her condition was very unsatisfactory, and caused much anxiety. Two days later there was a copious discharge of pus and blood in the urine. There