

Original Communications.

Extirpation of a Fibro-cystic Tumor of the Uterus, with the latter and its appendages, performed on the 12th of June, 1874. By E. H. TRENHOLME, M.D., B.C.L., Professor of Midwifery and Diseases of Women and Children, University of Bishop's College; Attending Physician to the Women's Hospital of Montreal, &c., &c.

Read before the Medicæ-Chirurgicæ Society of Montreal.

Miss Isabella Buchanan, aged 33 years, born in Brantford, Ontario, was examined by me for the first time, in October, 1873, presenting a healthy appearance, of medium height and dark complexion, but somewhat spare in flesh.

On special examination, a large globular tumor occupied the abdominal cavity. The abdominal walls very thin, and the skin over the tumor marked by numerous silver lines due to extreme distention; a dark line extends down the middle, and the superficial veins dilated; areolar of both nipples dark and well marked. The tumor is firm, appears non-adherent, as it can be freely moved in all directions.

Percussion elicits a dull note, and a small collection of fluid detected at upper part. Auscultatory sounds nil. Tenderness on pressure at the sides. Measurements are as follows:—

Girth at umbilicus, 41 inches; ensiform cartilage to umbilicus, 9 inches; from latter to symphysis, 11 inches; from right ant. sup. spinous process to umbilicus, 10½ inches; from left ditto to ditto, 9½ inches. External organs of generation normal. Vagina greatly elongated and pointing to left side. Uterus cannot be brought into view with the speculum, and also beyond reach of finger, except when standing with the left leg somewhat elevated. The uterus and right ovary can be felt on the left side of abdomen, over the tumor, before and during menstruation; left ovary not felt. Rectum and anus normal. The menses began when fourteen years old, and have always been regular, but painful, till the appearance of the tumor, since which time they have been free from pain. During the menstrual flow cannot lie on the left side; at other times can rest equally on either side. Urinary organs in good order. The bladder is expanded upwards above the pubes, and when the urine does not flow freely it is readily expelled by pressure of the hand. Digestion and appetite good; bowels regular, but for some months has been troubled with flatulence. With the exception of an occasional attack of palpitation of the heart there is no derangement or disease in the other organs.

Nervous system is in good order.

Respiratory system.—Has a slight cough and shortness of breath when troubled with flatulence, but not at other times.

Circulatory.—Says she "is liable to palpitation of the heart, as is her sister also;" but, at the present time, its impulse is slightly feeble, but otherwise regular and normal.

HISTORY.

Is of healthy parentage on the side of both father and mother; all her relatives are in good health.

The present ill health began in September, 1870, at which time she had an attack of what her physician called "gravel and inflammation of the bladder." After recovery from this sickness, she felt a growth in the left groin, which gradually increased in size. In 1871 the tumor grew rapidly and extended toward the right side. During the year had a slight leucorrhæal discharge, but, otherwise, suffered no inconvenience.

In February, 1872, had an attack of menorrhagia, which recurred again in May of the same year, and three or four times since; the last of which was in July, 1873.

PROGRESSIVE SYMPTOMS.

Patient continued in good health from July, 1873, to the end of January, 1874, when an offensive vaginal discharge made its appearance, which gradually increased in quantity till the last week of the following month (February), when she had what she called a congestive chill, that lasted for about half an hour. A high fever, for three hours, was then followed by profuse perspiration that lasted nearly half a day. After this had a severe headache that lasted a week. The patient's flesh and strength now rapidly failed. Night sweats set in; the vaginal discharge has continued, and is of a highly offensive odor. The menstrual flow is always preceded and accompanied by abdominal distention and intense pain. There are also continuous nausea, a fœtid exhalation from the skin, and a fœtid breath.

Diagnosis.—That the tumor is fibro-cystic, involving the body of the uterus toward the left side; that the ovaries are intact; and that a communication exists between the cavity of the uterus and a suppurating cyst of the tumor.

Prognosis.—From the decided failure in flesh and strength, since seen last fall, the presence of a suppurating cyst, the increasing agony and distention of the abdomen during every monthly period, the incipient urinary disorder, and the depression of