

I have heard from this patient quite recently, she is strong and robust in health, but has ceased menstruating. She had a menstrual period apparently at the end of the second week after the operation, which was the last seen.

CASE No. V.—Victorine V., æt. 24 years, not married, was admitted into the Private Hospital 15th March, 1881, being the subject of a large ovarian tumour apparently multilocular, with several large cysts, the following history was elicited.

She had enjoyed good health, had commenced to menstruate at the age of 14, catamenia always regular as to time and not excessive, lasting about three days, and painless.

About six years ago she noticed a swelling in the abdomen, which she declares was uniform and not situated in either groin. This gradually and steadily increased, until she became so much distended as to prevent her keeping the recumbent position. It was diagnosed to be ascites from liver obstruction. Purgatives and other means failed to reduce the swelling, and her physician relieved her by tapping; the fluid removed filled two buckets, and was thin, like water. She made a rapid recovery and on the third day was able to leave her bed. From this time, which was in March or April, 1877, the fluid rapidly accumulated, necessitating its removal every four or six weeks. So that up to the 18th February, 1881, the trochar had been used twenty five times. The fluid in quantity was on each occasion about the same as above stated, but in consistence it had changed, becoming more like gum water. She never suffered any pain or inflammatory symptoms after the tappings and with the exception of the inconvenience from distension was in good health, all the functions being regularly performed. When examined the cyst was moderately full, one month only having elapsed since the last removal of the fluid. The tumour extended to midway between the umbilicus and ensiform cartilage, there existed a well formed hymen, but with care the index finger was introduced into the vagina, the uterus was found of normal size, carried over to the left side and bulging, could be felt distinctly in Douglas' fossa, upon forcing upwards, a distinct wave was imparted to the contents of the tumour over the front