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OVARIOTOMY.

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Read before the Obstetrical Society of Edinburgh.

CASE I.—M. P., aged 23, unmarried, was admitted in January 24, 1884, complaining of a large swelling in the abdomen, of pain in the right side, of sickness, and of only being able to digest milk diet. Two years ago she suffered severe pain in right side and inability to eat. In August last she first noticed the swelling, and since that time it has rapidly increased in size. She had considerable menorrhagia and metrorrhagia from May till August last year.

Condition on admission.—Abdomen extended to size of eight or nine month's pregnancy by a tumor of slightly uneven outline, but, on the whole, of smooth contour. Tumor projects very far forward inferiorly, and seems to be more to the right than left side. Percussion note is dull over anterior surface of tumor, clear in flanks from back. Tumor appears to move slightly under anterior wall with forced inspiration. Measurement round umbilicus $35\frac{1}{4}$ inches; about $1\frac{1}{2}$ inches below umbilicus measurement is 38 inches. From right anterior superior spine to umbilicus, $9\frac{1}{4}$ inches. From left anterior superior spine to umbilicus $8\frac{3}{4}$ inches. From symphysis pubis to umbilicus, $8\frac{1}{4}$ inches. *Per vaginam.* Tumor presses down into anterior half of pelvis, displacing uterus to the left and backwards. Uterus appears movable at brim. No part of tumor is found in the pouch of Douglas. Sound enters towards the left and upwards, nearly 3 inches. *Per rectum.* Small body of uterus is distinctly felt apparently separate from the body of the tumor. On February 6th the patient was, after due preparation, submitted to operation. The room had been sprayed for some hours, and the usual antiseptic precautions were

employed, except the use of the spray during the operation. The abdomen was opened with ease. It was then found that the tumor was attached to the right broad ligament, and that there were considerable adhesions of its upper anterior part with the great omentum. Otherwise the tumor was free; the only considerable cyst in the tumor was tapped and about a pint of fluid run off. The edges of the tumor were now surrounded with sponges, and the tumor incised. The hand was then passed into the interior, the multitude of small cysts forming its mass were then broken up, and the contents squeezed out. In this way the tumor was lessened in bulk so as to pass through the abdominal wound, which originally measured about $3\frac{1}{2}$ inches. The omental adhesions were now fully exposed, and the attached part of the omentum was divided into a number of separate portions and tied by catgut ligatures. The pedicle was very broad and rather thin and short. It was transfixed and tied with silk ligature by the Staffordshire knot. As it seemed to ooze a little after being tied and the tumor separated from it, the loose ends of the thread were brought round the base of the pedicle and again tied. The sponges were now removed from the abdomen and the whole cavity thoroughly sponged out. The omentum was carefully inspected and no bleeding point discovered. The ligature was now cut short and the pedicle dropped. The abdominal wound was secured by deep and superficial sutures and the wound dressed with protective and salicylic wool and a flannel bandage. The patient was put to bed, surrounded by hot bottles, and a brandy enema administered. The operation lasted $1\frac{1}{4}$ hours. The solid weight of the tumor was 4 lbs. and the fluid above 12 lbs. The patient's recovery was excellent, though somewhat attended by persistent sickness and vomiting, which lasted for the first ten days after the operation, during which time she was fed by enemata. In the first few days the temperature ranged from 100 F. to 101.8, after that it became normal and remained so. Deep stitches removed on the seventh day, union complete. Patient improved daily after vomiting ceased, and was dismissed on March 10th, 1884, perfectly well.

Remarks.—Since the patient returned home I have heard that she continues to keep well. It is to be noted that the way the tumor was fixed