

interesting discussion on the subject by the experienced gentlemen who form this association. I should like very much to learn,—

1. What was the cause of the ankylosis? It was undoubtedly of the fibrous variety which the books tell us is the result of joint disease or of keeping an inflamed joint too long at rest.

2. What is the usual expectation as to cure or otherwise in such cases?

3. Can anything further be done to increase the usefulness of this man's hands?

A CASE OF INCARCERATED OVARY.

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Miss A. B., aged 26. Six years ago the patient developed a hernia in the left groin after severe exercise. The pain was severe at the time and persisted, recurring at frequent intervals ever since. A truss was ordered but only worn occasionally for a short time, then discontinued altogether. The pain was sometimes worse during menstruation but not always. Various nervous symptoms developed, especially headaches, which were frequent and severe. Menstruation has been irregular. During the last eighteen months there has been frequent and distressing vomiting which was treated by lavage, but without success. Three months ago the patient was admitted to St. Michael's Hospital and placed under a course of dieting and kept absolutely at rest, but with only slight improvement in the gastric symptoms and none in those of a nervous character.

There being a great deal of pain from the hernia it was decided after two months to perform the operation for radical cure. This was done, when it was found that the hernia was of the inguinal variety and that the left ovary and tube were within the sac and firmly adherent to it. Both were removed (the ovary being small and misshapen) and the wound closed in the ordinary way.

Healing was by first intention and recovery rapid. Full diet was commenced on the fourth day after operation. The vomiting did not recur. The patient was discharged on the thirtieth day after operation, there being only some slight nervous symptoms remaining.
