that origin. It is true that the left kidney was closely pressed upon by the lipoma, but it was not distorted nor firmly adherent, and the fact that the lower and smaller of the two tumour masses was so distinctly associated with the meso-colon lends a distinct support to the view that both had this origin.

It has to be kept in mind that tumours of this order may originate at practically any point beneath the peritoneum. While writing the notes upon this case there were received at the pathological laboratory, portions of a large tumour developing in the anterior abdominal wall. For these we were indebted to W. Jameson, of Rochester, N.Y. The tumour was so firmly adherent to the parietes that it became necessary to remove no small portion of the musculature along with the mass. But upon examination of sections made through the muscle and the tumour, the former is seen to be merely adherent and not infiltrated, and the tumour itself is a well defined myxo-fibroma, euriously like the myxo-fibromatous nodule above described, though without cartilaginous areas. From W. Jameson's description of the relationships found at operation, as again from a study of sections from different portions, the growth clearly originated in the subperitoneal tissue of the abdominal parietes.

Lastly, as to the duration of the growth in these cases. In general these tumours are peculiarly slow-growing; they have been noted frequently for periods extending over from two to seven years or even longer. The absence of systemic disturbance and the soft yielding nature of the tumours renders it possible for them to be present for long without being noticed. In a case such as this where the development has occurred during or after pregnancy, the enlargement of the abdomen might easily be attributed to other causes. Indeed, in this ease the patient came to the hospital, not because of the tumour, but because of the falling of the womb. That falling might, it is true, be due to the rupture of the perineum, but on the whole we may attribute it and the bearing-down pains to the presence of the growths. It is quite probable, therefore, taking everything into consideration, that the growths in this case were of more than a year's development and possibly, that the increased menstrual flow with bearing-down pains noted a year previous to the last confinement, were associated with the early stages of the growth. Thus it is quite possible that the duration of growth exceeds two years.

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