of the bullet was found an inch behind the track imbedded in brain substance. It had apparently rebounded from the interior of the skull, though no mark of impact was to be seen.

SHORT COMMUNICATIONS.

A CASE OF CYSTIC CANCER OF THE OVARY.

BY M. L. BROWN, M. D., NATICK, MASS.

Mrs. A., twenty-two years old, thin and spare, was married in August, 1877, and found herself in the following October in delicate health, with slight dyspeptic symptoms and difficulty in passing water; the bowels were constipated, as had always been her habit; menstruation was regular; the complexion was sallow and unhealthy. She was treated by a homœopath for some time, in the belief that she was pregnant, without relief.

About the middle of November she discovered an enlargement of the abdomen in the hypogastric region, which increased in size until she first came under my care on January 26, 1878. The abdomen was much enlarged, and rendered tense by a smooth, firm, rounded, immovable tumor rising from the pelvis. It was as large as the uterus at the fifth month. The catamenia were scant and irregular; the bowels moved daily.

In the following twenty days the growth increased very rapidly, and laterally there appeared irregular prominent semi-globular growths projecting from the central tumor. This rapid change led me to summon Dr. James R. Chadwick, of Boston, in consultation, who confirmed my diagnosis of ovarian disease. In view of the patient's poor general condition and the comparative smallness in the size of the tumor, he recommended the continuance of the tonic treatment and the postponement of operative measures. The patient improved somewhat in condition, although the tumor continued to grow until March 5th, when Dr. Chadwick, having detected a wave of fluctuation, inserted an aspirator to give temporary relief by the withdrawal of the fluid contents and to establish the diagnosis. Blood only escaped from the trocar, the end of which was felt to be immovable in the mass, thus indicating that it was of semi-solid consistency. Immediately suspecting cancer, we sent a small plug of tissue extracted from the trocar to Dr. Fitz for microscopic examination, but with negative results.

In less than two months the feet and legs became œdematous, the appetite capricious, emaciation extreme, and the breathing difficult. On May 18th we detected ascitic fluid, two quarts of which Dr. Chadwick removed with the trocar, at the same time expressing his conviction of the malignancy of the growth, and declining to extirpate the mass at the request of the family.

The patient failed rapidly, and died sixteen days later. Treatment consisted of Squibb's liq. opii comp., stimulants, and regulating diet, so as best to maintain her failing strength.

The history of this case from first to last corresponds with that given in Thomas's Diseases of Women for cystic cancer of the ovary, a rare form of cancer; so rare that in one thousand eight hundred and twenty-three cases of ovarian disease collected by Scanzoni but two were of cystic cancer. Treatment, either surgical or medical, tending towards cure avails nothing in these cases. They terminate fatally in less than a year. The duration of this case was about eight months.

Upon section of the body post mortem it presented the following appearance after removing about two quarts of ascitic fluid: An irregular globular encysted mass, nine inches in diameter, filled the abdomen and pelvis, pressing all the abdominal organs well up upon the diaphragm. The omentum was much congested, and that, together with the large and small intestines, the walls of the abdomen and pelvis, was thickly studded with diseased growths from the size of a buckshot to that of an English walnut. The liver was enlarged, and contained many masses of the same growth in its substance. On removing the encysted mass it was found to have grown from the right ovary; it nearly filled a common water-pail, and weighed twenty-five pounds.

Dr. R. H. Fitz microscopically examined a portion of one of the growths, and found it to be unmistakably cancerous, consisting of "innumerable small alveoli, in which were rather large round cells, many in a state of fatty degeneration, others having undergone mucous metamorphosis. There was hæmorrhage into the substance of the nodule."