

"The mucous membrane is about twice as thick as normal, slightly folded, and of a reddish-gray color."

"Microscopic examination shows a great increase of the tubular glands in relation to the basic substance. There is no evidence, however, of any tendency on their part to grow into the muscular substance."

"I should regard the case, therefore, as one of extreme hyperplastic endometritis."

"The ovary seemed normal, and at one end was a red disk-shaped, slightly opaque mass, with a deep-red centre and wrinkled edges, measuring two centimetres in diameter—a false corpus luteum."

The patient was seen May 9, 1890, a year after the operation, and as regards the pelvic organs the condition was very satisfactory. There was no evidence of any trouble at the seat of the operation. She had had a very severe attack of the "grippe," which had laid her up for weeks, and she had various symptoms which suggested trouble with the kidneys. Dr. Wood examined the urine, and reported a condition of hyperamia of those organs.

The justification for the operation lies in the long duration of the disease—four years—in spite of two, and possibly three operations for her relief; the increasing severity of the hemorrhage and discharge compelling her to give up her work on which she was dependent; the possibility of malignant disease, owing to the difficulty of making a diagnosis from the fragments removed; and also the fact that there was a clear history of cancer in two or three members of her immediate family.

A CASE OF CALCAREOUS FIBRO-MYOMA OF THE UTERUS

By Wiliam SigaLLS, M.D.

Patient sixty-three years of age; married; was never pregnant; menopause at about forty. March 16, 1890. First visit. Previous history that of one whose household duties and cares had overpowered will and physical strength. The prevailing symptom of her present condition was a comparatively moderate but uncomfortable distention by gas in the intestines, which increased, not very rapidly, but yet towards the end became very distressful. Treatment was unavailing. There were hours of quiet sleep within each twenty-four; but, for the most part, discomfort and pain overcame her phenomenal patience and pluck.

On examining the abdomen twelve hours after death, it was found to be greatly distended. A large quantity of gas escaped when the peritoneum was punctured. Exposure of the intestines presented great distention; color dark; appearance of recent limited peritonitis over descending colon. Several points at various portions of the intestines gave evidence of impending perforations, and at slightest touch, openings took place; and through these issued an immense quantity of nearly black, gumous and foul-smelling fecal matter. Following the intestines down to the rectum, a large, slightly folded, and of a reddish-gray color. The hard substance had pinched in a bit of small intestine, a portion of which, above and below, was cut off and removed with the mass. Throughout the case, urination was performed normally.

Dr. C. E. Stedman saw the case with me. Dr. W. W. Gannett kindly examined the specimen, and the following is his report:

"A hard, firm mass, having two lobes—the larger the size of a big hen's egg, the smaller the size of a walnut. The two lobes are intimately adherent to each other. The outer surface is rough and irregular, is covered with fibrous tissue; and at one point a bit of small intestine is attached by a mass of fibrous tissue."

"The mass, when sawn through, is found to have an outer shell of calcareous matter, and an inner portion made up in part of cheesy matter, but in great part of a very tough fibrous material. Microscopically, this is found to be fibrous tissue, with a fatty detritus."

"The mass is a sub-peritoneal fibro-myoma, which has become detached from the uterus, and has undergone a partial fatty degeneration, and calcification of the outer part, forming a shell."

A CASE OF VAGINAL Hysterectomy FOR CANCER: RECOVERY.

By JOHN DOMANN, M.D.

Mrs. T., fifty years old, entered the Massachusetts General Hospital with the following history:

Had borne three children: the youngest is now twenty-six years old. The menopause had taken place at the age of forty-five. For the last three years she has had a reddish-yellow discharge from the vagina, small in amount, at times rather offensive. During the last few months has lost considerably in weight. A sister died of cancer.

On examination, the uterus was found somewhat enlarged, the cervix thickened and eroded. A piece was cut off and sent to Dr. Whitney, who reported that it was cancer. The broad ligaments did not seem to be involved.

An operation was performed May 2, 1890. The mucous membrane was cut through with a knife, entirely around the os uteri. The bladder was pushed off from the uterus with the finger, traction being made on the uterus by an assistant with very strong vulvula. The vagina was continuously irrigated with a very weak solution of corrosive sublimate. The uterine wall was found to be nearly perforated by the disease at the junction of the neck and body. Posteriorly the uterus was separated from the rectum by the finger, and the peritoneum opened behind. The fingers were then pushed over the fundus from behind, and the anterior cul-de-sac opened. Two long pairs of interlocking forceps were clamped on each broad ligament, and the uterus was cut away on each side with scissors. At this stage of the operation the uterus tore in halves, and the upper and larger part, containing the body and fundus, receded into the abdominal cavity and the intestines appeared in the vagina. By bimanual pressure the uterus was made to reappear in the vagina, and one of the round ligaments was caught in a pair of compressing forceps, and by this hold the uterus was extracted. The forceps were left hanging from the vagina, one pair on each broad ligament, and one pair on each Fallopian tube. The pulse was 70 at the beginning of the operation, and the same at its close. The operation lasted about half an hour.