AN INSTANCE OF HYDATIDS DISCHARGED FROM THE UTERUS.

Reported by J. WEARNE, Esq., M.R.C.S. and L.S.A., Cornwall.

M. C—, aged thirty-six, married, and the mother of eight children, had supposed, four months ago, from the discontinuance of the menstrual discharge and from her increasing size, that she was again enceinte. But about a month ago, there occurred a somewhat free discharge of blood from the vagina, and she expected that she was about to abort. With occasional yet exhausting recurrences of uterine hæmorrhage, the case went on till the 24th of July, on which day I was requested to see her, with the gentleman who had been in attendance up to that time. She was then in a pallid, emaciated condition; pulse 120; vomiting occasionally; had been unable to retain food for several days; a small but steady discharge of blood still persisting; exhaustion not so great, but she preferred the sitting posture in bed.

On examining the abdomen, I found that it was distended, and I also observed that the feet were ædematous. With respect to the tumidity of the abdomen, it was observable, however, that it did not extend from one ilium to the other, but that on each side a sulcus existed between the tumour and the bone. The tumour, also, was inelastic, omental-like, more solid than water, scarcely at all fluctuating on percussion, and with none of the hard irregularities which might

indicate fœtal contents.

On passing my finger into the os uteri, I found it dilated to a little more than the size of a shilling. If anything could be said to present, it was uncertain whether it might be coagulated blood or softened placenta; I am inclined to believe it was the former.

When I left, I recommended Mr. Sargent, her surgeon, to examine her occasionally, although the uterine pains were almost imperceptible; and in case of any presentation at the os uteri, to give the ergot, to facilitate the discharge of the uterine contents. I heard no more of her case till the next day, when her husband came to me with a cupful of hydatids, and assured me that his wife discharged no less than four or five quarts of them in a short time after my visit on the preceding day.

I have before seen cases of uterine hydatids, but generally

after such discharge had commenced; but in this instance I have been enabled to watch and detail the preliminary appearances and symptoms, which I have thought it best to s nd to you for the benefit of those who may not yet have had the same opportunity.

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