ABSORPTION OF A LARGE FIBROID TUMOUR OF THE UTERUS UNDER THE USE OF ERGOT. By CLINTON CUSHING, M.D., of Oakland, California.

APRIL 21, 1876, I was sent for to attend Mrs. Jane S., æt. 44, mother of two children, the youngest 17 years of age. The history of the case disclosed that for four years she had been suffering from frequent and profuse uterine hemorrhage, attended at times with considerable abdominal pain, that during that time the abdomen had been steadily increasing in size, and that the general health was becoming seriously damaged. I found her excessively anæmic and so weak as to be almost wholly incapacitated for her household duties. She had been prescribed for from time to time by different physicians, but no one had made an examination as to the cause of the hemorrhage. Upon making an examination, I found the

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uterus enlarged to the size of that of the fifth month of pregnancy, quite symmetrical in its outline and firm and solid to the touch. Upon passing a sound, I found the cavity measured five inches in length, and that the growth was confined for the most part to the posterior wall. It was evidently a case of interstitial fibroid tumour, and a favourable case for its removal.

I at once ordered her to take a teaspoonful of the fluid extract of ergot night and morning. At the end of ten days severe expulsive pains began in the uterus, attended with a profuse white, flaky discharge from the vagina; the ergot was discontinued, and at the end of four days the pain ceased, when the remedy was again commenced, and again with the same result; and again the need for a temporary discontinuance of treatment until the pain subsided.

The treatment was pursued as above for nearly four months, the uterus during this time steadily decreasing in size, and the watery, flaky discharge at times becoming quite profuse and somewhat offensive. The menstruation came on at the usual time and was profuse, requiring confinement to the bed and the use of cold astringent injections. At the end of four months the uterus was found to be normal in size, the menstruation was normal in quantity, and the strength was steadily improving under the use of iron and wine. She is now at this date, August, 1879, in good health, with no return of the hemorrhage. Her menstrual flow occurs regularly, and is normal.

I wish to place this case upon record as an example of the good effects of ergot upon those cases of fibrous tumours occurring in the walls of the uterus, and giving rise to troublesome hemorrhage. I think there can be no doubt that in every case where the remedy is well borne, it should be given a trial in the class of cases above mentioned before resort is had to surgical measures. It certainly is safer than any of the various operative measures in use. It is claimed that ergot acts better in these cases when given subcutaneously, but I can see no advantage in this method if the remedy is well borne by the stomach.