CASE
OF
LARGE OSSEOUS TUMOUR
OF
THE UTERUS.

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I SUBMIT to the inspection of the members of the Society an unusually large osseous tumour of the uterus, weighing five pounds ; which occasioned no inconvenience during life, but which contributed to the death of the patient in a somewhat singular manner.

A maiden lady, aged 72, was run against by a large dog, and fell forwards on the pavement in Regent Street, the 18th of February, 1840. She felt severe pain in the belly, but was able to walk some distance. When I saw her, five hours after the accident, with Mr. Vickers, who was in attendance, she complained of most intense pain in the abdomen, which presented no external mark of injury, but was tense, extremely tender to the touch, and promi-

ment, in consequence of a hard tumour occupying its lower part. There was a pallid, anxious, and even an alarmed, expression of countenance. The skin was warm, the pulse nearly natural in its character. There had been neither sickness nor vomiting. The contents of the bladder were evacuated without difficulty, but with increased abdominal pain. Some severe internal injury was dreaded: leeches, with fomentations, were repeatedly applied,—opiates exhibited,—perfect rest and strict diet enjoined,—but the patient died in thirty-four hours.

The post mortem examination was made in the presence of Dr. Elliotson and Mr. Vickers.

On turning back the skin of the abdomen, a bruise with ecchymosis was found in the left rectus abdominis muscle. There was general and intense inflammation of the peritoneum, into the cavity of which fæculent matter had escaped. On searching for the origin of this, it was found to proceed from a small circular aperture in the ileum towards its lower part; the coats of the bowel at the spot, and the adjoining portion of mesentery, being ecchymosed.

The injured intestine formed part of a coil which lay in front of the convex surface of the tumour, already mentioned as having been felt through the abdominal parietes during life. This, as I have stated, was hard, in fact osseous, and of the size of the uterus in the fifth month of pregnancy; it likewise resembled it in shape; rising, too, out of the pelvis into the abdomen, and covered with perito-

neum. The rupture of the intestine, which was in front of this, corresponded in situation with the bruise of the rectus muscle ; and both had evidently resulted from the violence to which they had been subjected by the fall ; having been compressed between the convex osseous tumour *behind*, and the pavement in *front*.

On removing the tumour, which was effected with some difficulty, so firmly was it impacted in the upper opening and cavity of the pelvis, the bladder was found attached to it in front, low down ; but the uterus could not be readily made out. However, on tracing the vagina upwards, the cavity of the uterus was discovered in the shape of an elongated, very narrow canal, stretching along the posterior surface of the tumour, over which the Fallopian tubes were likewise spread out. The *form* of the uterus had *entirely*, and its *substance* in a great measure, dissappeared ; for while its posterior parietes, forming the back part of the elongated canal, were reduced to a state of extreme atrophy, so as to resemble membrane, the *anterior* had become expanded and stretched over the surface of the tumour, which had clearly been originally developed in its substance, and was now covered throughout by a very thin, but more or less distinct, layer of uterine tissue.

The tumour was of an irregular oval shape, being larger at the upper end. It measured *seven* inches in length, *nineteen* in circumference in the direction of the oval, *fourteen* round at the distance

of an inch from its upper end, *thirteen* at the same distance from its lower. The colour was yellowish white: the surface slightly tuberculated or botryoidal. It weighed, as has been already stated, five pounds. On being sawn through, it was found as hard as marble, and quite solid: yet the section presented an appearance as if the mass had been formed of several separate portions firmly agglomerated; an *appearance* arising, however, from minute traces of fibrous tissue being here and there still perceptible in it. Attached to the upper extremity of the large one, but distinct from it, there were several ~~small~~ tumours, varying in size from that of a pea to a chestnut, and which presented precisely the same structure.

Professor Daniell, who kindly undertook to analyse the tumour, has furnished me with the following statement of its composition.

Animal matter, including water and ammoniacal salts	35·
Phosphate of lime, with a small quantity of phosphate of magnesia	56·
Carbonate of lime	5·
Alkaline sulphates, phosphates, and muriates	4·
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	100·

When, on my first visit, I directed the patient's attention to this tumour, she attached no import-

ance to it, and remarked that it had been long there, and occasioned no inconvenience. Indeed, this had been so completely the case, that some of her nearest relations, who had been constantly in the habit of residing with her during the last thirty years, were not aware of its existence. One of them living with her at the time of the accident, thus expressed herself: “She was of unfailing activity,—took long walks, and was the foremost in any exertion, such as required much standing or stooping. Until the last ten years she rode on horseback.”

On application, however, to the lady’s sister, the following information was elicited:—

“It was in the autumn of 1808, or the spring of the ensuing year, that, in consequence of Miss —— having mentioned to Mr. —— that she felt something at the bottom of her stomach, resembling in size a goose’s egg, and from my not feeling, or rather my *wishing not* to feel, implicit confidence in the opinion which he subsequently communicated to me, of its being of a cancerous nature, and likely to produce consequences which might make her friends pray for her release, that I prevailed on Miss —— to see Dr. Denman, whom she had often met at my house, and knew intimately. I accompanied her to Dr. Denman’s; she submitted to an examination, and he prevailed on her to let Mr. Croft, who was in the house, make the same. They subsequently gave her some trifling directions, speaking cheerfully to her, and I entertained hopes from this circumstance that they had formed a different

opinion to Mr. —, but they took an opportunity of stating to me that they considered there was cancer of the womb, and quite as much in the inside as the outside ; but that it was in an inactive state, and that the less she thought or said about it the better ; and from that time to this, the subject has never been mentioned between us, though I could not but perceive the gradual increase of her size.”