only about a sixteenth of an inch. Further down, the segments measure three-eighths by one-eighth of an inch, and at the lower extremity their length is slightly less. These terminal segments have a peculiar shape, somewhat resembling that of the finger nail. In all these short segments, we have the uterus with about twenty lateral branches, so that the worm is an example of the *T. saginata*.

SCHEME FOR A PATHOLOGICAL INDEX. ✓

BY JAMES C. HOWDEN, M.D., MONTROSE.

THE pathological records of our hospitals and asylums contain a vast accumulation of valuable facts of which little use has been made, doubtless owing to the labour which would be entailed in wading through much irrelevant matter, in order to elicit information upon any special lesion which might be the subject of investigation.

Thirty years ago, with a view to overcome this difficulty, I drew out, for my own use, an index of lesions for the pathological record of the Montrose Asylum, which has been carefully kept ever since. When the report of an autopsy is drawn out, the various lesions are indexed under their respective headings, so that, at any future time, the cases in which they were found, could be referred to at once. On various occasions, I have been applied to for statistical information as to certain pathological conditions—*e.g.*, the frequency of gall-stones or cancer. Instead of having to search through volumes of pathological reports, my assistant was able, with the aid of the index, in half-an-hour, to give me a tabular statement of the cases in which the lesions occurred for the last thirty years.

In 1871, I published a short paper in the *Journal of Mental Science* (vol. xvii, p. 83), in which I endeavoured to explain the value and use of the index, giving, in illustration, an analysis of the *post-mortem* appearances in 235 insane persons. The analysis possibly diverted attention from the index scheme, which I was anxious to press on the attention of asylum medical officers, but which, so far as I am aware, has not been adopted in other asylums as yet.

The scheme given below is substantially similar to the index I have used. It has been revised by Professor W. T. Gairdner and Dr. Joseph Coats, Pathologist to the Glasgow Western Infirmary, and will, I venture to hope, be found useful in general hospitals as well as in asylums.

HEAD AND SPINE.	PAGE IN PATHOLOGICAL RECORD.	
	Male.	Female.
	Vol. Page.	Vol. Page.
SCALP,		
CALVARIUM—		
Abnormally thick,		
Abnormally thin,		
Irregular thickness of,		
Formation of new layering inside inner table,		
Asymmetry,		
Brittle,		
Fractures of the vault,		
Fractures of the base,		
Roughening of the outer table,		
Projecting spicules of bone from,		
Caries,		
Caries with perforations,		
Spongy,		
Eburnated,		
Abnormal injection of the diplœ,		
MEMBRANES—		
a. <i>Dura mater</i> —		
Rusty appearance on inner surface of,		
Sinuses, rupture of,		
„ thrombosis in,		
Pacchionian bodies,		
Extravasation of blood between calvarium and,		
Firmly adherent to calvarium,		
Abnormally thickened,		
Ossification of,		
Tumours involving,		
Congestion of,		
Rusty staining of,		
b. <i>Arachnoid</i> —		
Effusion of blood into sac of,		
Sanguineous cysts in,		
Excess of cerebro-spinal fluid in,		
Semi-gelatinous fluid in sac of,		
Pus in sac of,		
False membrane in sac of,		
Crystalline granulations on,		
Opacity and thickening of,		
Adhesion of surfaces of,		
Tumours involving,		
c. <i>Pia mater</i> —		
Marked injection of vessels of,		
Œdema of,		
Pus in,		
Gelatinous fluid in,		
Local bullæ of fluid,		
Sanguineous effusion in,		

HEAD AND SPINE (*continued*).

PAGE IN
PATHOLOGICAL RECORD.

Male.

Female.

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MEMBRANES (*continued*)—

Tumours involving,
Brown gelatinous deposit in,
Thickening of,
Adhesion to the grey matter of,
Tuberculosis of,

BLOOD-VESSELS—

Aneurismal dilatation of,
Miliary aneurisms,
Embolism in,
Thrombosis in,
Injection of,
Atheroma of,
Opacity on the line of,
Venous congestion,
Punctæ,

GREY SUBSTANCE—

Bullæ on the surface of,
Abnormalities in the thickness of,
Abnormalities in the colour of,
Anæmia of,
Injection of,
White softening of,
Red softening of,
Atrophy of,
Edematous condition of,
Superficial cyst in,
Flattening of the convolutions,
Effusion of blood into,
Increased vascularity of,
Tumours in,
Granulations on surface of,

WHITE SUBSTANCE—

Induration of,
Edema of,
White softening of,
Brown softening of,
Effusion of blood into,
Effusion of pus into,
Excessive shrinking of,
Marked injection of the vessels of,
Cysts in,
Atrophy of,
Tumours in,
Pink mottlings,
Irregular vascularity of,

HEAD AND SPINE (<i>continued</i>).	PAGE IN PATHOLOGICAL RECORD.	
	Male.	Female.
	Vol. Page.	Vol. Page.
OPTIC THALAMUS AND CORPUS STRIATUM— Hæmorrhage in, Punctiform hæmorrhages in, Pink gelatinous softening of, White softening of, Tumours in, Cysts in, Patches of sclerosis, Local atrophies, Cicatrices in, Atrophy of the optic nerves and tracts, Grey sclerosis of the optic nerves and tracts,		
VENTRICLES— Excessive serous fluid in, Granulations on, and thickening of ependyma, Sanguineous effusion into, Purulent effusion into, Tumours involving, Dilatation of,		
SEPTUM LUCIDUM— Leathery conditions of, Tubercle in, Bullæ in,		
CHOROID PLEXUS— Cysts in, Tumours in, Earthy deposit in, Congestion of, Edema of,		
CORPUS CALLOSUM— Softening of,		
PONS— Atrophy { (a) General, (b) Unilateral, Hæmorrhages into, Softening of, Congestion of, Softening of floor of fourth ventricle,		
CEREBELLUM— Adhesion of membranes to, Effusion of blood into pia mater of, Tumours in, Pus in, Edema of,		

NECK—THORAX.	PAGE IN PATHOLOGICAL RECORD.			
	Male.		Female.	
	Vol.	Page.	Vol.	Page.
<p>CEREBELLUM (<i>continued</i>)— Softening of, Atrophy of { (a) General, (b) Unilateral, Corpora dentata,</p> <p>SPINAL CORD— <i>Membranes</i>— Congestion of, Pus in, Tuberculosis of, Calcareous scales on, Excess of cerebro-spinal fluid, Softening of, Sclerosis of, False membrane of,</p> <p>GENERAL CONSIDERATIONS— Marked difference in the weight and size of the two cerebral or cerebellar hemispheres, Abnormally firm consistence of the brain, Simplicity or complexity of the convolutions, Narrow and atrophied convolutions, Shallow sulci, Softening of crus, Apparently normal brains, Softening of the right hemisphere, Softening of the left hemisphere, Abnormalities of nerves,</p> <p>NECK.</p> <p>Affections of thyroid gland, Affections of larynx, Affections of trachea, Affections of pharynx, Affections of blood-vessels, Affections of lymphatics,</p> <p>THORAX.</p> <p>RIBS— Malformations of, Fracture of, Callus on, Excessive softening of, Effusion of blood external to, Effusion of pus, external to, Ossification of the cartilages of,</p>				

THORAX (<i>continued</i>).	PAGE IN PATHOLOGICAL RECORD.	
	Male.	Female.
	Vol. Page.	Vol. Page.
<p>PLEURA—</p> <p>Effusion of serous fluid into, Effusion of sanguineous fluid into, Purulent matter in, Congestion of, Perforation of, Thickening of, Calcareous plates on, Fibrinous deposit in, Blood in, Adhesions of—</p> <p>Right side { Universal, Partial, Left side { Universal, Partial,</p> <p>Tuberculosis of, Tumours involving,</p>		
<p>LUNGS—</p> <p>Tubercular or cheesy condition in { (a) Right, (b) Left,</p> <p>Cavities in { (a) Right, (b) Left,</p> <p>Cancer in { (a) Right, (b) Left,</p> <p>Congestion of { (a) Right, (b) Left,</p> <p>Edema of { (a) Right, (b) Left,</p> <p>Red hepatisation of { (a) Right, (b) Left,</p> <p>Grey hepatisation of { (a) Right, (b) Left,</p> <p>Lobular hepatisation of { (a) Right, (b) Left,</p> <p>Gangrene of, Abscess of (non-tubercular), Emphysematous dilatation of { (a) Right, air-cells, { (b) Left,</p> <p>Perforation of substance from pleural surface, Brown induration of, Pulmonary embolus, Carbonaceous deposit in, Calcareous deposit in, Old cicatrices in, Collapse of right, Collapse of left, Infarction of right, Infarction of left, Fibroid degeneration (non-tubercular),</p>		

THORAX (<i>continued</i>).	PAGE IN PATHOLOGICAL RECGRD.			
	Male.		Female.	
	Vol.	Page.	Vol.	Page.
BRONCHI— Injection of, Pus in, Blood in, Dilatation of, Bronchial glands enlarged, Bronchial glands calcified,				
PERICARDIUM— Adhesion of the surface of, Marked opacity of, Thickening of, Serous fluid in the sac of, Fibrinous deposit on, White patches on, Tuberculosis of, Effusion of blood into,				
HEART— Substance pale and flabby, Hypertrophy of, Small, Dilatation of right auricle, ,, left auricle, ,, right ventricle, ,, left ventricle, Surrounded by fat, Fatty infiltration of, Fatty degeneration of, Cysts in the substance of, Tumour in the substance of, Fibrinous transformation of muscle,				
MITRAL VALVE— Malformations, Cauliflower excrescence on, Thickening of, Incompetency of, Stenosis of, Pouch-like dilatation of, Atheroma of, Fenestræ in, Adhesion of curtains,				
TRICUSPID VALVE— Malformations, Thickening of, Cauliflower excrescence on, Incompetency of,				

THORAX (<i>continued</i>).	PAGE IN PATHOLOGICAL RECORD.	
	Male.	Female.
	Vol. Page.	Vol. Page.
TRICUSPID VALVE (<i>continued</i>)— Stenosis of, Pouch-like dilatation of, Atheroma of, Fenestræ in, Adhesion of curtains,		
AORTIC VALVE— Malformations, Thickened, Fenestrated, Cauliflower excrescence on, Incompetency of, Stenosis of, Adhesion of curtains, Atheroma of, Calcareous deposit on, Enlargement of the corpus arantii, Fibrous nodules on,		
PULMONARY VALVE— Malformations, Thickening of, Fenestration of, Cauliflower excrescence on, Incompetency of, Stenosis of, Adhesion of curtains, Atheroma of, Calcareous deposit on, Enlargement of the corpus arantii, Fibrous nodules on,		
AORTA— Atheroma of, Ulceration of, Dilatation of, Perforation of, Aneurism of, Blood-stained,		
CORONARY ARTERIES— Atheroma of, Fatty deposit on, Thrombosis of, Embolus in,		

ABDOMEN.	PAGE IN PATHOLOGICAL RECORD.	
	Male.	Female.
ABDOMEN.	Vol. Page.	Vol. Page.
PERITONEUM— Serous fluid in, Purulent fluid in, Sanguineous fluid in, Tuberculosis of, Cancer involving, Foreign body in, Inflammation of, Adherent to parietes, Hernia, { Internal, { External,		
STOMACH— Malformations of, Cancer of, Perforation of, Adhesion to liver and absence of part of wall, Congestion of, Inflammation of, Ulceration of, Distension of, Small bloody extravasation of, Tuberculosis of mucous membrane,		
ŒSOPHAGUS— Stricture, { (a) simple, { (b) cancerous, Dilatation of,		
LIVER— Malformations, Fatty, Waxy, Nutmeg, Hypertrophy of, Atrophy of, Tubercle of, Tumour in, Cancer in, Cysts in, Bony nodules in, Hydatid cyst in, Other parasites, Earthy deposits in, Abscess in, Infarction of, Fissures of, Cirrhosis of, Lobulation of,		

ABDOMEN (<i>continued</i>).	PAGE IN PATHOLOGICAL RECORD.	
	Male.	Female.
	Vol. Page.	Vol. Page.
LIVER (<i>continued</i>)— Yellow patch on surface of, Inflammatory adhesions to peritoneum, Capsule adherent, „ thickened, Biliary obstruction and staining,		
GALL BLADDER AND MAIN DUCTS— Gall stones in, Obliteration of duct, Distension of, Bile gelatinised in, Cancer involving, Ductus communis obstructed,		
SPLEEN— Capsule thickened, Capsule puckered, Cysts in, Waxy, Earthy deposit in, Tubercle in, Fissured, Pulpy, Enlarged, Secondary spleen, Congested, Infarction of,		
PANCREAS— Hypertrophy of, Atrophy of, Cysts in, Tubercle in,		
KIDNEYS— Malformations, Fatty, Waxy, Abscess of, Cysts in, Calculi encysted in, Calculi in pelvis of, Hydronephrosis, Dilatation of ureter, Simple atrophy of, Simple hypertrophy of, Infarction in, Hæmorrhagic extravasation on surface, Large congested kidney,		

ABDOMEN (<i>continued</i>).	PAGE IN PATHOLOGICAL RECORD.			
	Male.		Female.	
	Vol.	Page.	Vol.	Page.
KIDNEYS (<i>continued</i>)— Large pale kidney (not waxy), Small kidney, smooth, Small kidney, granular, Capsule adherent, Multiple abscesses, Pelvis congested, Pelvis hæmorrhagic, Pyonephrosis, Local tuberculosis, Disseminated tuberculosis, Tuberculosis of ureter, Cancer, Other tumours,				
BLADDER— Distended, Inflammation of, Calculi in, Diverticulæ, Hypertrophy of muscular coat,				
PROSTATE GLAND— Enlargement of, Cancer of, Tuberculosis,				
SCROTUM—Affections of,				
TESTICLES — Absence or malformations of, Calcareous deposit in, Tuberculosis of, Tumours of,				
PENIS— Malformations, Phymosis, Paraphymosis, Cancer of, Ulcers of,				
MESENTERIC GLANDS— Enlarged, Cancer of, Tuberculosis of,				
OMENTUM— Tubercle of, Cancer involving,				

ABDOMEN (<i>continued</i>).	PAGE IN PATHOLOGICAL RECORD.			
	Male.		Female.	
	Vol.	Page.	Vol.	Page.
<p>INTESTINES—</p> <p>Malformations, <i>Post-mortem</i> discoloration of, Gaseous distension of, Arterial injection of, Venous injection of, Waxy, Ulcerations of duodenum, Tubercular ulceration of jejunum, Do. do. ileum, Do. do. ascending colon, Do. do. transverse colon, Do. do. descending colon, Non-tubercular ulcerations, Strangulation of, Constrictions of, Intussusception of, Rupture of, Croupous inflammation of, Inflammatory matting of, Ulceration of cæcum, Affections of vermiform appendage, Herniæ, Diverticula, Twists of, Piles,</p> <p>UTERUS—</p> <p>Malformations, Myoma, Cancer of, Other tumours, Calcified tumour in, Enlargement of, Mucous polypus in, Cysts in broad ligament, Dermoid cysts in broad ligament, Prolapse, Adhesions of,</p> <p>OVARIES—</p> <p>Malformations of, Colloid cystoma, Cysts with dendritic vegetations, Cysts largely solid, Dermoid cysts, Solid tumours,</p> <p>PELVIC CAVITY—</p> <p>Hæmorrhagic cysts in,</p>				

BONES—EXTERNAL LESIONS.	PAGE IN PATHOLOGICAL RECORD.			
	Male.		Female.	
	Vol.	Page.	Vol.	Page.
<p style="text-align: center;">BONES.</p> <p>Abnormalities, Tuberculosis, Caries, Fractures, Soft condition of, Exostosis, Tumours of, Sinus in, Abscesses in, Necroses of, Curvature of,</p> <p style="text-align: center;">EXTERNAL LESIONS.</p> <p>Gangrene, Bed sores, Bullæ, Contracture, Hæmatoma, Edema of legs, arms, &c., Tumours of the breast, Mottling of the legs, Markings or discolorations from old ulcers, &c.,</p>				

A CASE OF EXTIRPATION OF THE UTERUS FOR FIBROIDS.*

By J. K. KELLY, M.D.,
Lecturer in Gynæcology, St. Mungo's College.

THE case I have to bring before you is that of an unmarried lady, Miss G., aged 46.

I was asked to see her on 10th October, 1890, as she was suffering from some uterine enlargement, which was causing obstruction to both urine and fæces, the symptoms of obstruction having become rapidly worse during the preceding few days. The catheter had, for some days, been required in order to relieve the bladder; it had been passed with some difficulty,

* Read before the Obstetrical Section of the Medico-Chirurgical Society of Glasgow, 21st November, 1890.