That is, the fat and sugar are deficient, while the ash and albuminoids are in excess.

These two analyses may be regarded as giving typical results. For though the different foods have the constituents in different proportions, they are all very far from bearing a resemblance to mother's milk.

(To be continued.)

INJURIES FROM THE TOO LONG USE OF PESSARIES.*

BY DR. J. H. HAMILTON, ATTWOOD, ONT.

Perhaps of all the diseases met with by the every-day practitioner, the most common is some of the forms of uterine displacement so graphically described by our various authors on "Woman and her diseases," as retroflexion, retroversion, anteflexion, anteversion, prolapsus, inversion, etc. Why we should have so much trouble of this kind is to me a mystery, inasmuch as such disorders are attributed to over-work, straining, etc. When we know that the present age is not one in which woman figures as a slave, and when we see our healthy-looking neighbors from Germany and other countries where out-door work is not uncommon, passing through life without any troubles of the kind—it leads us to think that the less vigor we see in life and the finer the organization, the more liable we are to see all these forms of uterine displacement. A want of vitality or tonicity in the organ itself and its attachments are no doubt important factors in the causation of the trouble. Dr. Martin, of Berlin, ascribes their causes to defective involution, *i. e.*, where the placenta is adherent to the posterior wall and the site thus remaining longer in a state of sub-involution and consequently longer than the anterior wall, the fundus turns to the front and we get anteflexion, and *vice versa*, by sub-involution of the anterior wall we get retroflexion; but I have seen many cases, without a shadow of a doubt, of genuine retroflexion in young women where sub-involution was unknown, thus going to show that a uterus can be retro- or ante-flexed by other means—as falls, stepping suddenly out of carriages, horseback riding, etc.

For the relief of such troubles, the ingenuity of the specialist in this class of diseases has been taxed, and we have had many devices for the relief of these disorders. The history of pessaries shows that we have had, to date, about 150 kinds, together with various uterine supporters for these disorders; and most authors, together with the voice of every-day experience, are unanimous in proclaiming them nearly all faulty. The pessary first made by Hodge was shaped like the letter U and it was found when used any length of time to be injurious to the coats of the bladder, going so far sometimes as to puncture them; and when the two ends were afterwards united, it was found that the cross-bar pressed on the urethra and interfered with its function. Although I have no doubt the Hodge pessary is at the present time more used than any other where a pessary is any use at all.

In years gone by they were made mostly of metal, but at the present time are nearly all made of gutta percha, vulcanite, or, better still, a round of wire covered with india rubber and moulded to any shape we desire.

I have found that the great trouble with all pessaries is, that a small one not reaching from the ischiatic bones to the symphysis, and well over, is useless, and a large one, of whatever form, is liable to produce ulceration of the vagina, leucorrhœa, etc., as well as destroying the elasticity of that organ when worn continually; and I have found in many cases that a pledget of iodoform gauze, borated cotton wool, or any other such substance, gives more relief in cases of minor displacements than the hard unyielding pessary; and the rubber ball with a tube attached, which can be easily placed by the patient and then filled with air and tied, is an excellent device. I have known this to keep *in situ* a prolapsed womb in an elderly lady where the shrivelled womb was not of great weight.

Now we all know that whatever may be the use or abuse of pessaries, a great many are worn in this country, and it is the duty of every medical man when he once places one to not forget it, and watch carefully the results. After they are worn for a time, I have heard of a few women who forgot they were there and lost their lives in consequence, and I will give you a case in point.

In November of 1889, Dr. Philp and myself

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