

That ventral suspension—not fixation—when properly performed in combination with other procedures, does relieve the malposition, and prevents more surely than any other method a recurrence of the same. Its dangers are small, if any, in subsequent pregnancy and delivery. It has the advantage of being quickly and easily performed, and is applicable in all cases where any other method is, and in very many cases it is the only method that offers a reasonable hope of permanent cure.

That those who criticize most severely the two time-honored operations—Alexander's and ventro-suspension—are those who have some pet operation of their own, or a modification of some one else's to extol.

In conclusion, Mr. President, I am here to make the statement that while ventral suspension, in common with every other human endeavor, has its failures as well as its successes, it more nearly approaches a universally applicable operation for retro-deviations of the uterus than any other method known to the medical profession.

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