

In five months, from March to August inclusive, 1892, thirty-four patients, comprising twelve fibromata and twenty-two affections of the appendages, were treated at the clinic of Dr. G. Apostoli by the alternating current. This was done with the co-operation and assistance of Drs. Grand and Lamarque, the total number of séances being 320.

All the patients were submitted to a uniform application, one pole in the form of a sound being introduced into the uterine cavity, and the other, a large clay pad, upon the abdomen. The duration of each séance was five minutes, and was renewed two or three times a week.

The rapidity of the alternations varied according to the circumstances, or rather to the sensibility of the patients, and oscillated between a mean of four to six thousand, and a maximum of ten to twelve thousand per minute.

The apparatus employed is the first model constructed by Gaiffe, which is really but the magneto-faradic machine of Clark, modified and transformed by Arsonval, giving at its greatest rapidity a maximum difference of potentiality of sixty-four volts and at its average rapidity a difference of thirty-two volts. This apparatus is driven by a pedal.

All the thirty-four patients were carefully watched, and the following are the general conclusions which were obtained from this initial period of treatment, conclusions which do not always appear definite to Dr. Apostoli, because of the imperfect instruments and the relative short duration of the period of experimentation:

1. The alternating sinusoidal current applied to the interior of the uterus under the operative conditions under which Dr. Apostoli was placed, was always inoffensive and well supported.

2. Its application was not followed by any painful or febrile reaction, but, on the contrary, was very often accompanied by a manifest sedation.

3. It did not seem to have a restrictive action on hemorrhagic symptoms, but, on the contrary, sometimes had a tendency to cause their continuance.

4. It exercises a specific action on the symptom *pain*; this action obtains in the first séances, and most often at the end of the first séance.

5. It usually, but not universally, relieves leucorrhœa, which diminishes or disappears under its use.

6. It has no appreciative action on the hydrorrhœa associated with certain fibromata.

7. Its influence upon anatomical retrogression of fibromata is not yet definitely established.

8. Its action favors the resolution of peri-uterine exudates.

In conclusion, this treatment, though recent and still apparently incomplete, has always given a sufficiently definite response that it may be permitted to be considered a happy conquest in gynæcological therapeutics. Succeeding researches will enable us, in the near future, to determine and fix the operative conditions under which we may the better combat the different pathological states (hypertrophies, infections, or cellular inflammations), and there will be opportunity to vary in such and such a case the number, the duration and the frequency of the séances, and to study the different curative results due to variations in voltage and intensity of the current as well as the rapidity of the alternations.

The results achieved prove that the alternating sinusoidal current should take a place in gynæcology by the side of, but not yet above, the faradic and galvanic. It is destined to assist them either as a completing active auxiliary or as a supplement to them, and to fill the new and personal indications which the future will establish more definitely.

It is at present the remedy *par excellence* for pain; and if it will not make a clean sweep of galvanic and faradic applications,