

which after removal of the ovaries for fibroid, menstruation has continued.

The long held view of supernumerary ovaries is discarded by Bland Sutton. He thinks that these so-called structures are merely small bits separated from the main mass of the ovary by deep fissures.

In several of these cases of unchecked menstruation, second operations have been performed by which small bits of ovary left from the first operation have been removed, being followed by a complete cessation.

2. *Relation to the Fallopian Tubes.*—According to Lawson Tait, removal of the tubes, the ovaries being left *in situ*, is followed in 95% of cases by cessation of menstruation. This remarkable statement has been little noticed. If it can be established by extended observations, it proves that there is some close relationship between the tubes and the menstrual process.

3. *Relation to a Special Nervous Mechanism.*—Johnstone has advanced the view, supported by Lawson Tait and others, that the menstrual act is a special function related to a distinct nervous mechanism. They think that possibly a special nerve trunk running in the upper part of the broad ligament may convey the regulating currents. Johnstone suggests that *when the ovaries or tubes are removed, menstruation is checked because this nerve is ligatured or divided*. In the cases in which removal of the appendages is not followed by cessation of the flow, he thinks that the nerve may have escaped division or ligature, owing possibly to its being placed low in the broad ligament.

While undoubtedly believing in this special nervous mechanism of menstruation it seems to me that possibly the nerve tract is not so limited as Johnstone suggests. The plexiform nature of the nerves about the uterus is so complex that it is presumable that the impulses affecting the mucosa of the uterine body travel by many routes in the broad ligaments.

4. *Relation of Menstruation to Conception.*—By some it is believed that menstruation is a process for preparing the uterine mucosa for the engrafting of the fertilized ovum, that it is in fact, an essential feature. This idea was promulgated when it was thought that the ovum required a connective tissue free from covering epithelium to become engrafted on. I have repeatedly urged its improbability on the following grounds:

a. In all mammals below homo, so far as is known, the ovum grows in relation to the epithelium-covered uterine mucosa and does not require a connective-tissue surface. The uterine epithelium is