

RETROFLEXION.—Theilhaber (*Monats. f. Geb. u. Gynäk.*, October, 1895) denies the necessity for any radical cure for retroflexion. The symptoms attributed to it are, in his experience, rather due to atony of the bowels, neurasthenia, metritis, endo-metritis, or other diseases than to retroflexion. Orthopædic methods do no good, but much benefit is derived from symptomatic treatment. Obstruction is not in his opinion caused by the displacement, and he has treated ninety-five cases, most of them with atonia coli, without any reposition: only two were intractable. Women with retroflexion do not seek medical advice unless they suffer from hæmorrhage or leucorrhœa, and the metrorrhagia or nervous disturbances are due to other causes than the faulty position of the womb. Finally he protests against the number of vaginal fixations, admitting the necessity for the operation only in cases of prolapse.—*British Medical Journal*.

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SALOL AND ANTIPYRINE IN THE TREATMENT OF UTERINE HÆMORRHAGE.—Berman (*Allg. Wiener med. Ztg., Ctrbl. f. Gynäk.*, March 15, 1896) gives an account of Labadie-Lagrave's method of using intra-uterine applications of a mixture of salol and antipyrine as a hæmostatic. Equal quantities of the two drugs are heated together in a test tube over a lamp until a deep-brown mixture forms. As soon as this has cooled sufficiently, a film of cotton on an applicator is dipped into it and passed into the uterine cavity. This is done two or three times in succession. The procedure is said to be painless and not to be followed by unpleasant effects. It is said also that a second resort to it is rarely necessary. Labadie-Lagrave has been using it since the year 1893, and with better results than with any other method. In cases of fungous endometritis, the application should be made after curetting. It is not only hæmostatic, but also antiseptic, and tends to prevent a relapse.—*N. Y. Medical Journal*.

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GUAIACOL IN DISEASES OF THE BLADDER.—Colin contributes an important article on the treatment of cystitis by guaiacol (*Jour. de Med.*, January 26th, 1896). He finds that the injection of guaiacol carbonate has a very marked influence upon the pain, frequency of micturition, and the state of the urine in all forms of chronic cystitis. He mentions particularly cases in which tuberculous cystitis was greatly benefited by the use of this drug. The form in which he employs it is a 20 per cent. solution in olive oil, 1 to 2 gr. of this being injected once or twice daily. He also recommends the addition of iodoform 1 per cent., as increasing the efficacy of the treatment. The author