

ovarian being tied at first. Dr. Kelly removes the uterus in all cases in which it is necessary to remove the appendages. He has had over a hundred hysterectomies without a death, and his death rate for all coeliotomies (abdominal sections) is less than 3 per cent. He uses medium Chinese silk for tying arteries, and fine silk for sewing the peritoneum both of the pelvis and also of the abdominal incision, which is closed in three separate layers. First, the peritoneum is brought together with a running suture; then the fascia is fastened with buried silver wire about a quarter of an inch apart, and then the skin is sewed with silk worm gut. Several cases were seen which had been closed in this way several weeks previously, and there was perfect union, and the buried silver wire did not seem to cause any inconvenience. It could barely be felt beneath the skin. This method of closing the abdomen has reduced the percentage of hernias to the vanishing point. But it is in his original studies on catheterization of the ureters and kidneys that Howard Kelly has scored his greatest success. With patient in the knee chest position he empties the bladder of urine and fills it with air so that it is like a small balloon. By means of his speculum and the laryngoscopic mirror the light of the incandescent lamp is thrown in, and every part of the bladder wall can be distinctly seen, even the little spurts of urine or pus or blood in case of disease of the kidneys is perceived escaping from the right or left ureter, or both. Then with due aseptic precautions he runs up the ureter into the pelvis of the kidney a catheter two feet long, with which he empties cases of pyo nephrosis, and then washes out the pelvis of the kidney. He has thus cured several cases of diseased kidney which in former times would have had to have the organ removed, or die of suppuration. He demonstrated this method for us several times with the greatest ease. He also showed us the walls of the sigmoid flexure of the intestine with his long rectal speculum over a foot long. Dr. Kelly is just completing a work on Gynecology, which will be every word original. It will give his own opinions founded on his own experience. His revenue from private practice is said to reach a fabulous amount. We were curious to find out his secret of keeping his health in spite of such a tremendous amount of work, and to our surprise we discovered that it was nothing more nor less than the bicycle. Twice a week he devotes the whole afternoon to a long ride out in the country. One would think that his time would be so precious that he could not spare any time for the care of his health. But in this again he shows his great wisdom. Without those few hours of muscular exercise and deep breathing his strength would breakdown and his brain give out; but with it we

find him fresh and full of energy after two or three big operations; and he told us that he rarely felt tired. He keeps himself in fine physical condition. If we had learned nothing else, that alone was worth the trip to Baltimore. He has two secretaries, and he devotes two mornings a week to dictating to them, two other mornings a week at the Johns Hopkins, and two other mornings at his private hospital and office. The world has heard something of Howard Kelly already, but unless we are mistaken we will hear a great deal more of him yet, if his life is spared. There is much more that we would like to mention, but our letter has already reached considerable proportions so we will close, reserving the rest for another communication.

Yours truly,

A. LAPHORN SMITH.

THE MEDICAL COUNCIL.

The newly-elected Ontario Medical Council meets to-day, and very general interest is felt as to what may be the results of the session. As compared with that of its predecessor, the personnel of the appointed and homœopathic contingents remains practically unchanged, while that of its elected element is transformed—only four of the former members having secured re-election. The thirteen new men, and at least two of those re-elected, are pledged to favor very important and organic reforms, especially in the direction of retrenchment, the restriction of the council privileges at present held by the universities and medical schools, and the elevation of the council's standards of educational requirements for matriculation and graduation. As fourteen of the thirty-one persons who compose the council are quite irresponsible to the profession—being beyond its reach through any available or effective channel of control—those striving for projected reforms may find them unattainable. If, however, they can show that the measures they propose are reasonable and just, that they are clearly devised in the interests of the profession, and that they are calculated to promote the safety and well-being of the public, it is scarcely conceivable that any of the elected members will be unwise enough to oppose them, and thus fly in the face of their constituents. Such measures may also be expected to win the support of the homœopaths in the council, who are more or less committed in favor of economy and educational advancement.

Strange to say, the university and school appointees, who until quite lately have been generally regarded as the special advocates of more advanced educational standards, have in the Medical Council invariably cast their influ-