

performed this operation often, has made the same mistake. How frequently have we all heard it said in consultation, "No operation is needed in this case, because the sound can be easily passed along the cervical canal!" And again, how often have we heard it said—how often have I said it myself—"An operation is necessary in this case, because the canal of the cervix is too small to permit the easy entrance of the semen!"

Now, these important questions cannot be determined with any degree of accuracy in this haphazard manner. For it is not always necessary to insert the cervix uteri, simply because it does not easily admit the passage of an ordinary sound; nor, on the other hand, are we justified in condemning an operation, simply because the sound can be passed easily. In other words, a very small os does not always call for operation, nor does a larger one always forbid it. Do you not think, then, that a great service would be rendered, if we could reduce this question of operation or no operation, from the broad domain of speculative opinion to the narrow path of absolute scientific certainty? There is nothing easier, for the microscope accomplishes this in the most perfect manner imaginable. It settles the question of operation, or no operation, in an instant, leaving nothing whatever to be guessed at, and nothing to be desired.

Is it surprising that positive knowledge of this sort should meet with opposition among honest, earnest cultivators of medicine? Not at all. For it is ever so with any great truth. It must first be opposed, then ridiculed, after a while accepted, and then comes the time to prove that it is not new, and that the credit of it belongs to some one else. The truth here announced has had its day of opposition, and it must now soon take its stand as established and acknowledged.

On the subject of the microscopic examination of the utero-vaginal secretions, I have been misrepresented, maligned, and positively abused by a few both abroad and at home; and I have been misunderstood by many who have not taken the trouble to read, to investigate, to think, and to reason for themselves. And, Mr. President, under these circumstances, I cannot thank you too much for the high privilege of appearing here to explain and to defend my position by laying the facts in the case before this learned Society, this great gathering of my countrymen, whose decision, I am sure, will be in accordance with truth and justice.

We may all differ honestly about abstractions, and theories, and mere opinions; but, when it comes to facts and figures, there cannot long be a great difference among men of good common sense, with honesty of purpose in pursuit of truth. I have never yet been afraid of truth, however much it may conflict with prejudices, find it where I may; nor do I ever expect to see the day that I would fear to publish my convictions on any matter of professional importance, be the character of the opposition what it may; and, particularly, when I feel that these convictions are based upon facts that are immutable, and that lead to results of the gravest importance to the honor of medicine and to the advancement of knowledge. Whatever gives to any department of medicine greater exactitude, helps to raise it to the dignity of a science. And this is what I claim to have done with the microscope in this direction.

The microscope has done, and is doing, a great work in medicine, as well as in the collateral sciences. But I know of no field in which it will be of more practical use than in the diagnosis and treatment of the sterile state. For, where every thing was a short time ago in doubt and confusion, all is now made clear by this wonderful instrument. Even in this day there are many very honest cultivators of medical science, who do not believe in the value of the teachings of the microscope.

The great Velpeau died, having no faith whatever in its practical utility. A few years ago, I was one of those benighted scoffers who believed it to be merely a scientific toy, with which to while away leisure hours. Fortunately, my ignorance was dispelled, and I now look upon the microscope as essential to the daily duties of a physician.

With these prefatory remarks, I now beg leave to give you some illustrations of its use in the treatment of the sterile state.

In the investigation of any case of sterility, there are three questions that must be settled at the outset, if we expect to treat it understandingly:

1. We must be sure that we have semen with spermatozoa.
2. We must ascertain if the spermatozoa enter the utero-cervical canal.
3. We must determine whether the secretions of this canal are favorable or not to the vitality of the spermatozoa.

For, if the semen does not contain spermatozoa, of course the uterine condition does not call for any treatment whatever. But if it does contain spermatozoa, and if they do not enter the cervical canal, then there is the question of operation or not, to permit their entrance.

On the other hand, if we should find spermatozoa in the cervical canal, then, as a rule, no operation will be needed; and if we should find them there in abundance, and all alive, then the case needs no treatment whatever. But, if we should find them there, all, or nearly all, dead, then it is evident, that the secretions of the utero-cervical canal poison them, and therefore the physical condition, giving rise to this abnormal secretion, must be searched out and treated.

(TO BE CONTINUED.)

Case of Placenta Prævia, Successfully Treated by Simpson's Method.

By JOHN W. BOOTH, M. D.,

OF TALLY-HO, NORTH CAROLINA.

On the 22d of June, 1868, I was hastily summoned, about sunrise, to visit, with Dr. Cozart, the family physician, Mrs. R., about six months advanced in her seventh pregnancy, who had been suddenly attacked, the previous evening, with profuse and bloody hemorrhage, which had almost ceased spontaneously before the arrival of Dr. C. There had been a very slight discharge of blood during the night and until I saw her. We both remained with the patient until the morning of the 23d, when leaving her to the care of Dr. C., I made some necessary calls, and returned late in the afternoon to take charge of her during the night, that Dr. C. might attend to his most urgent duties and