

Disuccinyl peroxide, or more familiarly known as Alphozone, has many advantages peculiar to itself, and careful tests thoroughly demonstrated its germicidal power and non-toxic effects.

Alphozone was found to be equally as destructive to pathogenic micro-organisms as mercury bichloride, but, as it has no deleterious influence upon the tissues to which it is applied and is devoid of all toxic effects even in fairly large doses internally, the importance of the discovery of Alphozone cannot well be estimated.

OVARIAN CYSTS SITUATED ABOVE THE SUPERIOR PELVIC STRAIT, COMPLICATED BY PREGNANCY.

In the *September Surgery, Gynecology and Obstetrics*, there appears a paper on this subject by Dr. Charles L. Patton, of Springfield, Illinois. The paper is exhaustive and well worth a careful reading. The following conclusions at which he arrives:—

- (1) Ovarian cyst is not an infrequent complication of pregnancy.
- (2) Ovarian cyst is a dangerous complication of pregnancy. This danger varies with the kind of treatment instituted for its relief.
- (3) Removal of the cyst by laparotomy before labor yields the best results for mother and child.
- (4) The mortality in laparotomies, during pregnancy, for the removal of an ovarian cyst is not greater than in the non-pregnant patient.
- (5) There is no definite elective period in which laparotomy should be performed. The case should be operated on as soon as the diagnosis is made.
- (6) Dangerous complications are more frequent in ovarian cysts with pregnancy than in those where pregnancy is absent.
- (7) Ovarian cysts are, especially dangerous in the early puerperium.
- (8) Tapping an ovarian cyst gives only temporary relief, is not curative, and is a dangerous procedure. It should only be employed in those cases of enormous distension where operation is absolutely refused.
- (9) Induction to labor and craniotomy entail absolute death of the child, and are of great danger to mother.
- (10) If, for any reason, treatment by other means than laparotomy before labor becomes necessary, it should be followed by removal of the cyst as early in the puerperium as possible.