

and there was some, although not very marked, rolling out of the lips. The uterus was of normal size, and was not displaced. Dr. Skene allowed me to perform the operation and assisted me on the 21st December, 1881. Sims' speculum was used to bring the cervix into view in this and the other operations. After passing a sound I fixed on each lip of the cervix a double tenaculum at the spot where the centre of the external os was to be. With Skene's hawk-bill and Emmet's scissors I pared first the left and then the right side of the cervix leaving the central part untouched for the cervical canal. There was little hemorrhage. Three sutures were required on each side and after they had been tied up I passed a sound to be quite sure that the cervical canal was patent. This precaution is not altogether unnecessary, for I have since seen a cervix on which a so-called Emmet's operation had been performed, but where the menstrual discharges after the operation escaped through a small opening at the junction of the cervix with the vagina. There was retention of urine for twenty-four hours, and this was the only trouble the patient had after the operation. The sutures were removed on the seventh day, she sat up on the tenth, and at the end of a fortnight she came to Dr. Skene's office. The union was not as good as it might have been. However, the backache was quite gone, and the pain in the loins was not so bad. I have not heard of her since.

CASE II.—A lady, age 26, was seen by my father in April, 1882. Two years before she had been delivered of a seven month child with forceps, after having been in labor with convulsions for 48 hours. Since then she has suffered from constant backache and leucorrhœa. On examination with the speculum it was seen that the left side of the cervix was torn, and that the tear extended into the mucous membrane of the vagina. The right side was intact. The cavity of the uterus was increased to four inches, and there was no displacement. In May, 1882, I operated in the same way as in the previous case, except that one side only had to be repaired, and that two of the eight silk sutures which were required were entirely in the vaginal wall. After the stitches had been tied the tear measured two and a half inches. The patient had no trouble after the operation. On the ninth day two of the sutures about the centre of the line were found to have cut their way out. Injections

of hot water were given night and morning, and the other silk sutures were left in for two days more. Three weeks after the operation the cervix looked almost as though there had never been anything the matter with it. The uterus now measured two and a half inches. The backache and leucorrhœa had entirely disappeared. This lady kept perfectly well for seventeen months. She was then delivered of a child at term and since has had a slight return of the old trouble. A short time ago my father found that there was a slight tear anterior to the former one.

CASE III.—The patient, age 29, came under notice in March, 1882. She had at that time been suffering for four and a half years, since the birth of her only child, from backache and pain in the left groin. The labor had been a natural one. The backache has steadily increased, and more especially during the last twelve months. The cervix was hard, torn on the left side only. In July I operated. On account of the hardness and hypertrophy of the cervix I had to remove a thick slice of tissue before I was able to turn in the everted edges. The bleeding was rather free at first, but had quite ceased before I introduced the five sutures which were necessary to bring the parts nicely into position. The sutures were taken out on the ninth day, and on the eighteenth the patient went home. The line of union was very good, the backache was gone, and the pain in the left side was somewhat better. In December of same year the patient wrote to say that she had no pain and was cured. She kept well until six months ago, the leucorrhœa appeared accompanied with occasional pain in the side and back. Her doctor told her that she was much better for having had the operation done, so I suppose that the present illness is not due to my opening up of the cicatrix.

CASE IV.—Mrs. H., age 31, suffered from backache, pain in the groin, and leucorrhœa for ten months, since an abortion at about the fourth month. She had been a patient of Mr. Butler Smythe at the Grosvenor Hospital for Women and Children, Westminster, for a number of weeks, and had improved to a certain point, but could not be made to advance further by any of the usual treatment for such cases. When Mr. Smythe asked me to look at the case the cervix was torn on both sides, principally on the left, and the everted edges