

and after being continued to within less than one inch from the perineal surface, then carried straight in the mesial line, and dividing the soft parts freely for about half an inch from the raphe perinei the same oblique portion of the incision was then made upon the opposite side.

Pledgets of Charpie soaked in a weak solution of Persulphate of Iron were placed in the incisions, and a compress secured by a T. bandage; the strictest quiet, and rest in bed were enjoined. Cold applications of lint, wet with iced water were kept up, the bladder being relieved every 8 hours by using the catheter. After forty-eight hours the dressings were removed, and one of Sims' glass dilators directed to be introduced occasionally, and retained for about two hours. Four days after the operation, the use of the dilators proving extremely painful, full anaesthesia having been induced again, the remains of the hymen were carefully and thoroughly removed by a small curved scissors. No haemorrhage followed, and in about 24 hours the dilators could be tolerated. Two weeks after the first operation the local treatment for the inflammatory condition of the cervix uteri was commenced, and after about two months treatment a complete cure was effected, resulting in the birth of a healthy son in less than ten months. This case is one of the milder type, the next is a fair sample of the more severe forms of the disease.

Mrs M married about 3 years, without issue, declares that perfect connection has never been effected. Her husband has been morbid and unhappy, and the matrimonial alliance is likely to terminate in great misery for all parties. Examination per vaginam could not be thought of, the attempt was violently repelled by involuntary struggles. After inhalation of Chloroform, examination disclosed the hymen partially ruptured, and the entrance of the vagina rigid, and small as in the virgin state, keeping up the anaesthesia the incisions were at once made as already described, and then immediately the remains of the hymen were carefully dissected away. Persulphate of Iron was applied to the bleeding surfaces, and a small glass dilator was introduced and maintained by compress and bandage.

In 24 hours the dilator was removed, wet compresses applied, and 48 hours after the operation a larger dilator was introduced for about two hours. From this time, for about fourteen days, the dilators were inserted, gradually increasing their size at intervals of about two hours, and retained about two hours each period. At