## DOMINION MEDICAL MONTHLY

taining it. My clinical experience with it was fairly satisfactory, but I was still on the lookout for "something better," when it was my good forunte to run across Ergoapiol (Smith). This was only about six months ago, when it was recommended to me, while in consultation with a physician in my locality, and the results were more than satisfactory.

Still, as often happens, through force of habit, I believe, I forgot it for the time being, and wandered back to my old routine, and it was not until my attention had once more been drawn to Ergoapiol by the receipt of a sample package that I once more prescribed it. I was just then wrestling with a case of obstinate amenorrhea, and it was on this case that I expended ten of the capsules, giving one every three or four hours. These proved sufficient to give relief at that particular time, though, of course, I have followed up the same line of treatment ever since with excellent results.

It was then that I began to consider the matter seriously, for I had tried every one of the so-called Standard preparations without feeling any certainty as to results; but, now, as a result of many trials, and but few failures, Ergoapiol is one of the trusted remedies in my armamentarium, and is likely to remain in that class as long as it is obtainable.

I have now had sufficient experience with it in the treatment of cases of uterine and menstrual disorders so common in the every-day practice of the general practitioner, that I have no hesitation in recommending its use.

In this introductory note, I can only say further that the cases quoted below, as having been successfully treated with this remedy, are only such as are met with in every-day practice, and as I regard this class of most practical importance to the general practitioner, I shall give but little attention to those that are only rarely encountered.

Case I. Mrs. J. N.—I first saw this case in April of this year, and, on inquiry, discovered a history of two abortions, both in the third month of pregnancy. A slight leucorrhea has resulted from the first mishap, but after the second one this became aggravated, and was accompanied by severe pain in the region of the ovaries and an almost continuous backache, both of which were very markedly increased just previous to and during menstruation. Currettment had been performed twice, but without much improvement, and the menstrual periods began to be irregular, both as to time and quantity of flow. At first I applied the usual forms of medication, internally and by douche, but while a slight improvement occurred, it was not until I put

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