

incision is in the region of the groin the dressings may, in spite of the most careful nursing, get soiled, and then infection of the wound and serious suppuration may ensue. A point in favour of operations in children is that they are not adversely affected by prolonged rest in bed and show no tendency as the result of this to develop such complications as chest troubles or bed-sores.

In old age attention should be directed to the condition of the patient's organs and tissues rather than to the actual number of years. Some elderly people are quite good subjects for operation. Such, generally speaking, are spare, active and wiry; fat, flabby, plethoric old people are, on the other hand, usually bad subjects.

Like children, old people do not stand shock well; they also are seriously affected by loss of blood and do not show the recuperative powers of younger patients.

It must be remembered, too, that in old people confinement to bed may lead to congestion of the base of the lungs and hypostatic pneumonia—a very fatal sequela in such patients.

Bed-sores may appear as the result of long-continued pressure on the ill-nourished skin over the bony prominences, and will not infrequently contribute to a fatal result.

No operation, however, for an acute condition, seriously threatening life, and capable of cure or relief by surgical interference, is contra-indicated solely on account of old age. If a skilled anaesthetist considers that a general anaesthesia is not desirable, either spinal anaesthesia or local anaesthesia may be employed.

The results of prostatectomy show what can be done by operative treatment in old men, who apart from their urinary trouble are often very feeble and whose organs are by no means healthy.

**Sex.** By some, women are regarded as better subjects for surgical operations than men. This, however, is the effect of temperament rather than sex, and the bearing of the former upon operative treatment will be discussed below.

When operating upon women it is always necessary to bear in mind the importance of any unsightly or disfiguring scar, especially upon any exposed part of the body. In a man a scar upon the face can often be completely concealed by the moustache or beard; in a woman such concealment is impossible.

It is thus necessary, when planning any such operation, to take care that the scar is in as inconspicuous a position as possible. This can frequently be accomplished by making the incision in the line of some natural fold or crease in the skin. Accurate apposition of the edges of the incision, early removal of stitches, and primary union of the wound are all of the greatest importance in securing a neat scar.

Unless urgently called for by some acute trouble, operations in the groin, perineum, or abdomen should not be carried out during menstruation. With regard to operations in other regions the wish of the patient should be considered. Many women prefer to have nothing done at this time, but should the patient make no objection no harm is likely to result. Operations are best avoided during pregnancy, especially during the later months. The danger here, of course, is that an abortion may follow. The chance of such an accident is however slight, and not infrequently it will be felt that the risk should be taken.

Operations for acute abdominal troubles, and the removal of ovarian