

traindicted operation, only about half the cases operated on would be attempted.

Dr. ALLOWAY remarked that this case showed how difficult it was to prevent sepsis in cases where old inflammations existed. The symptoms here tally with Emmet's views, viz., that the dysmenorrhoea is due to a parametritis.

*Ovarian Cysts from a case of Double Ovariectomy.*—Dr. GARDNER exhibited the sacs of the two cysts removed by him from a woman aged 31, unmarried. They were of slow growth and began on the right side. The only distress had been pelvic pain. The right side of the abdomen was distended to about the size of an adult's head. The left tumor was the size of an orange, and the uterus lay between them. The first cyst was easily managed. It was much more difficult to get at the second, as it lay below and behind the uterus in Douglas' fossa, and was adherent to the uterus. It burst, and the contents being a tarlike fluid it was not easy to remove it all. Warm carbolic acid solution was used, but did not dissolve it. The fluid in both cysts was of a dark-brown color, from old hæmorrhages into them. A glass drainage tube was used. Patient died the third day of peritonitis. No pus escaped till the very last. About two ounces of bloody serum came away each day. The operation was performed under strict antiseptic precautions. It is the experience of all that long operations are very fatal. Sir Spencer Wells' percentage of deaths in double ovariectomies is 34.15. Mr. Lawson Tait's figures give a better shewing.

Dr. Alloway exhibited a *decidual cast of the uterus about twenty days old*. The points of interest where the distinctness with which the embryo-formation could be seen through the membranes, and the formation of the decidua reflexa as it arched over the ovum-sac, but which had not been quite completed, leaving a transparent facet looking towards the interior of the uterus and through the membranous walls of which the embryonic cell formation could be distinctly seen. Dr. Alloway drew attention to the evidence this specimen bore towards the correctness of Costa's views in regard to the formation of the decidua reflexa.

#### A LOCAL ANÆSTHETIC.

Dr. LAPHORN SMITH read a paper on the use of a mixture of about equal parts of chloral hydrate and camphor as a local anæsthetic. He stated that when placed in the solid form together in a bottle they soon produced a clear, thick liquid,

which, when applied on a piece of lint, covered with oil silk, to a painful surface, complete analgesia resulted. He reported three cases in which he tried it with good success. The first was a whitlow of the finger, which the patient refused to have opened. Shortly after applying it the pain disappeared, and three days later it was lanced and the pus let out without the patient, a young lady, experiencing any pain whatever. The second case was a very painful bubo, which completely disabled the patient, a gentleman, from doing his work. The mixture of chloral hydrate and camphor was applied frequently on a piece of lint, with the result that a few hours after the first application he was so much relieved that he returned to his duties next day, and fluctuation becoming evident a few days later, it was opened, the operation causing only about a quarter of the usual amount of pain. The third case was an operation for the removal of a large sebaceous cyst of the face, which was removed after the frequent application of the local anæsthetic for several hours previously by means of a brush.

The incision in the skin was almost painless, but it produced no effect upon the deeper structures to which the cyst was firmly adherent. The action of the anæsthetic is much less marked on healthy than on inflamed and painful skin.

Dr. REED was familiar with the compound. G. E. Saunders of Montreal had shown that this is a simple mixture of the ingredients, and not a true chemical compound. Dr. Reed would suggest the solution in chloroform as a topical application.

Dr. STEWART had used a mixture of chloral and camphor for neuralgia, but now uses menthol.

Dr. GURD has found an ointment made by mixing half a drachm each of camphor and chloral hydrate to one ounce of lard of great benefit in pruritus.

## Correspondence.

### OUR NEW YORK LETTER.

#### A VISIT TO BLACKWELL'S ISLAND. THE LYING-IN HOSPITAL.

SIR,—Would your readers like to go with me to Blackwell's Island? If so, we will take the little boat called the *Wickham*, at the foot of East 52nd St., and land at the home of the pregnant, the abode of those whose sins have wrought their misery, (those affected with venereal disease), the place reserved for those who have violated the civil