(1) Mechanical causes, such as pregnancy, do not produce varices, but only cedema or slight dilatation, which does not constitute a varicose condition. (2) The formation of varices is due to a pathological condition of the internal saphena. which is probably congenital. (3) The general predisposition is mostly hereditary, and its presence can be recognized by the figure, such persons having long legs and being tall. The congenital local predisposition consists in there being a deficient number, or a total absence, of valves in the saphena vein. (5) Such a defective vein may perhaps resist dilatation for some time through a thickening of its intima (compensatory endophlebitis). (6) When this deformity is present, varices follow naturally, there being in such a case no valves between the right heart and the periphery. The part of the paper relating to treatment is of more general interest. There are practically three operations now practiced. (1) Trendelenburg's, which consists in dividing the internal saphena vein between two ligatures above the junction of any large collateral branch. This at once does away with the hydrostatic pressure. Excellent results are obtained as regards the usefulness of the limb, though the varices do not actually disappear, since the vein below the ligature is still permeable. This operation is indicated in not too severe cases, where the smaller veins only of the leg are varicose, and all the more the older the patient. (2) This consists in a combination of the above procedure with excision of isolated varicose nodules, and often gives better results than a simple Trendelenburg. (3) When the whole saphena from above downwards is varicose, the only rational cure is total excision of the whole vein. This is known as Madelung's operation. The chief incision reaches from a hand's breadth below Poupart's ligament to the ankle, and there are other incisions over the larger tributary veins. Any ulcers are at the same time swaped or excised. This operation is especially indicated in young persons.

Dangers—Five writers have reported cases of thrombosis, and four cases of embolism, one of which was fatal (embolism of the lung)—all after Trendelenburg's operation. Not much has been written about Madelung's operation, and no fatal case has been reported. It must be borne in mind that the same dangers (embolism and thrombosis) beset every kind of operation on veins, and also that they are very liable to occur in varicose veins without any operation.—Med. and Surg. R.

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