

the ostium vagina. C to R is the portion that straddles the rectum, resting on the soft parts on the most dependent portion of the floor of the pelvis. The curve D is the part of the pessary felt in a digital examination when *in situ*. Passing the finger over D, the full rectum can be felt between the branches at R. Raising the point of the finger to E, the cervix uteri will be felt on a level with the lower border of the flexible apron E and resting upon it. Pressing the finger laterally, the base of the bladder may be felt folding over each side of *a* to A and encroaching on the space below the upper convex portion *a* to A.

B along the dotted line to *b* represents the curve through which the fundus swings when the bladder is full or empty. The space contained by lines connecting the letters *a* B A

would indicate the position of the bladder when collapsed. U S L indicate where the utero-sacral ligaments are joined to the cervix uteri; by lifting up the uterus in the way indicated, shows how much the tension will be taken off the utero-sacral ligaments.

Diagram No. 3 shows the cervix resting on the flexible apron between the side branches.

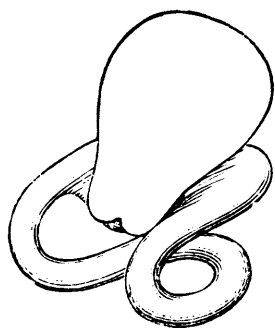


Diagram No. 3.

I append a few cases in which it has been successful.

CASE I.—Mrs. C. came into my hands September 26th, 1882. I found her suffering from uterine areolar hyperplasia, chronic uterine congestion, metrorrhagia and menorrhagia. The flooding had been continuous for four months. She had miserable health for the past two years or since the birth of her last child. The case was complicated by the usual secondary or remote diseases: anæmia, impaired digestion, congestion and functional disorder of the liver, neuralgias, inability to walk, etc.

By the 1st of January, 1883, most of the symptoms were improved, except the locomotion and distressing pains resulting from prolapsus uteri. I had tried an excellent pessary recommended for such cases, viz., Dr. Gehrung's, of St. Louis. It answered very well for a day or two, but was too hard and not of sufficient breadth to carry the weight. The effect on the tissues was to form a deep depression on the anterior portion of the cervix, with tumefaction of the tissues above and below the depression.

After many experiments and failures, I succeeded in producing the pessary presented to you. As soon as it was applied, she said she seemed very

comfortable, and that she thought it would succeed. I visited her every three or four days for the next two weeks, and was gratified to find that it was entirely satisfactory. She immediately began visiting friends in the adjacent city, walking three or four miles every day without inconvenience. From the time the pessary was first applied, she remained under my care for six months, gaining strength the whole time. By recent correspondence, I learn that her health has been completely restored. After wearing it for three or four months, she stated that she never was so free from backache since she was a girl.

CASE II.—Was a patient of Dr. Woolverton's, of the city of Hamilton, who stated that it acted satisfactorily.

CASE III.—Mrs. W. came into my care in March, 1884, suffering from complete or external prolapse of the uterus of eight years' standing. Being poor and unable to pay for an operation for the purpose of diminishing the capacity of the vagina and narrowing the outlet, I concluded to try the pessary or support as I called it. She had extensive erosion of the cervix, with great difficulty in urinating, was a constant sufferer, and expected to be laid up for a month. I reduced the dislocation, by putting her on her hands and knees and using gentle pressure. I introduced Dr. Gehrung's double horse-shoe pessary, recommended by Dr. Mundé, in his work on Minor Gynecology. It caused a ring of ulceration in three or four days. I should explain that I used it because I had none of my own or hand. I removed Dr. Gehrung's and applied my own. She has been wearing it with perfect comfort and success ever since, that is for eighteen months, and began attending to her regular duties immediately, and states that she is not conscious of wearing anything, and wishes she could have seen me eight years ago.

The following letter was addressed to me, which is conclusive of continued success:

PARKDALE, August 29th, 1884.

DEAR SIR,—It is with much pleasure I am able to say that I am so much improved. I suffered over ten years. Since I came under your treatment I have been quite a new creature. I cannot express my thankfulness too much for what you have done for me. It is now six months since I commenced wearing your support, and I attribute my restoration to its use.

Yours truly,

A. W.