

and that we might sometimes save our patients many risks and dangers, if we used it more frequently. As regards morbidity after confinement I am under the impression that we had better results in hospitals when the prophylactic douche was used sedulously and vigourously in all suspicious cases, than we have had since we have acted upon the theory that, if let alone, the vagina is capable of protecting itself against infective organisms and that consequently a prophylactic douche is not only unnecessary but even injurious.

To my mind the point of greatest clinical importance in this paper, from the obstetrical point of view, is that although the vagina seems to be capable of protecting itself against the organism when it is whole and sound, yet it loses that power when invaded by the gonococcus and weakened thereby.

Another clinical point of value is that on account of the unreliability of smear preparations in the matter of diagnosis, we must fall back upon the cultural method. Now practically, as general practitioners, how does this affect us? Smears are easily made but are unreliable as a diagnosis; cultures are the only safe and sure way of getting trustworthy results, yet the most of us have neither the time, nor the facilities nor the experience to carry out this method. In hospitals, well equipped laboratories are at command and diagnosis should be easy, but in private practice what facilities are available? Of what use is it to us clinically to know that a diagnosis of the presence or absence of gonococci in certain suspected secretions could be made bacteriologically, if we do not have access to a laboratory? It seems to me that this is a matter for this society, that it would be quite within the Society's rights to propose the establishment of a clinical laboratory open to all, a civic laboratory or government laboratory if you will to establish the diagnosis of diphtheria, typhoid etc., and also to help those engaged in obstetric practice to work out these interesting and important problems.

C. W. DUVAL, M.D.—I followed Dr. Gurd in his work at the laboratory for the past year and I wish to say that I regard his paper as a most excellent and painstaking piece of work. I do not think, however, that Dr. Gurd lays quite enough stress upon the unreliability of the smear preparation as a means of diagnosis, and also not enough stress upon the ease with which the gonococcus may be isolated. If the food stuff and the reaction of the medium are correct, the gonococcus is an easy organism to cultivate.

*(To be continued.)*