

Nay, had we not better start a new specialty of surgical anthropology; with trained anthropologists in our midst the ever advancing tide of gynæcology may, perhaps, be stemmed for a time at least.

Now, Mr. Editor, do you not think it high time^{*} for the gynæcologists either to confine themselves strictly to their specialty or else don a new name and not follow in the track of the homœopaths, for soon gynæcology, like homœopathy, will become a mere shibboleth to juggle with and to entrap unsuspecting womankind into submitting to intra-peritoneal examination of its organs.

I fear I have already taken up too much of your space, and must subscribe myself, without shame, in spite of the sneers of your "competent and unprejudiced onlooker,"

A GENERAL SURGEON.

[We are glad that our few gentle words on "Gynæcologists vs. General Surgeons" in our last number has called forth the above interesting communication from "A General Surgeon." We are not at all surprised that the general surgeons should be alarmed and even indignant at the invasion of a territory which they fondly believed to be theirs and theirs only, especially when they see it invaded by a band of remarkably able men. All specializations of work in all fields of human progress meet with opposition in the beginning. Is it then to be wondered at that the general surgeon should take alarm when he looks into the near future and finds himself practically excluded from work in abdominal surgery? It must be apparent to every thinking medical man that we will soon have a distinct class of the profession whose work and energies will be devoted to the surgery of the abdomen, pure and simple. It makes little difference whether this class will evolve out of the general surgeons or out of the gynæcologists. At the present time gynæcology appears to supply the elements for the more perfect fruition. It is not half a century since the general surgeon occupied the entire field. What would be the state of ophthalmology at the present time if it were still in the hands of the general surgeons? What would be the condition of otology if there had never evolved out of chaos a Politzer or a Gruber? Would laryngology be in its present advanced state if none but the general surgeon practised it? Before another decade passes away the general surgeon