

rhubarb should be given to secure efficient purgation, or the intestine should be irrigated with warm saline solution. After this we have found benzonaphthol the most efficient antiseptic. It may be given in doses of from 1 to 5 grains to children, and from 5 to 15 grains to adults, every second hour, or less frequently as necessary. When desired, bismuth salicylate may be added as an auxiliary astringent, and if an opiate is additionally needed, Dover's powder may be employed. Diet, of course, must be properly regulated.—*Philadelphia Polyclinic*.

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RESULTS FROM ALEXANDER'S OPERATION.—Kummer (*Centralbl. f. Gynak.*) publishes statistics of fourteen cases in which he operated, recording no results where the after-history is less than a year long. Four of the operations were for prolapse, and ten for retroflexion. In all the four cases of prolapse plastic operations on the vagina were also undertaken, so that whether the result was due to the shortening of the round ligaments or to colporrhaphy could not be decided. In one case the prolapse, notwithstanding the combined operations, recurred; in three, observed respectively three years, one year and a half, and one year, cure was complete. Of the ten retroflexion cases, in five complete cure followed Alexander's operation; three seem cured, but are excluded as the after-history was under a year, whilst in two the displacement recurred. In both these failures there were adhesions affecting the mobility of the uterus, it seemed so easy to draw the organ forward that Alexander's operation was preferred to hysteropexy. The latter is always safest when any adhesion exists. In the five completely cured cases, as well as in the three recently performed, all the uncomfortable symptoms, so prominent in many cases of retroflexion, disappeared; the uterus remained in its normal condition of ante flexion. One patient had been married for three years, but had never conceived. After the operation she became pregnant, and was delivered at term. The uterus remained ante flexed after involution. Kummer modifies some of the details of Alexander's operation according to circumstances.—*Medical and Surgical Reporter*.

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A TYPOGRAPHICAL ERROR.—In the report of Dr. Campbell's case of Phlegmasia Dolens, line 16, page 25, of the July number, the word "hyperinotic" and not "hypnotic" should appear.

DR. J. McBRIDE has removed from Heathcote to Cataraqui.