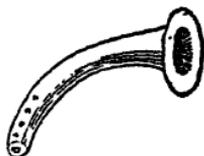
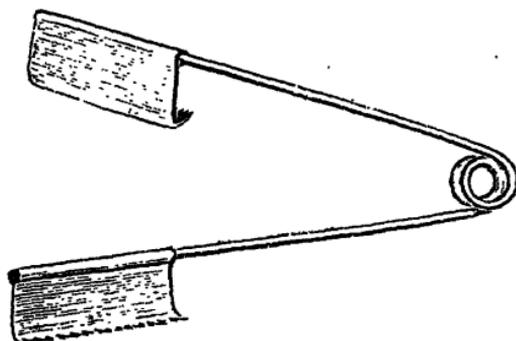


operation under irrigation of plain boiled water, and not allow nurses through the medium of sponges (however clean) to cause me to run any chance of infection from without. It is now well acknowledged that spongy connective tissue is extremely liable to break down under the influence of septic infection. It has not the same degree of vitality as muscle or the peritoneum. The latter, in fact, is a veritable digester of filth, and is difficult to influence in this way. On this account I now never make a vaginal examination on the day of the operation, and am more scrupulously careful in every way than in the case of any other operation. I think that the prolonged use of pressure forceps to keep the wound open while the ligament is being searched for has a tendency to cause severe injury to the connective tissue. I have therefore devised a very convenient wound speculum which answers as a reflector as well. This instrument is inserted directly the inguinal opening is reached; it is self-retaining, and acts also as a good reflector.



DRAINAGE TUBE.
(Full size.)



WOUND SPECULUM.

In regard to protection of the wounds, I think it will be well to cause the patient to wear a double truss for a few months, especially if a hospital patient with a pendulous condition of the abdomen. I am having such an one made with a large soft pad, which will be worn with more comfort than the ordinary double hernia truss.