

STERILITY AND DYSMENORRHOEA TREATED BY BILATERAL INCISION OF THE CERVIX UTERI.

CASE 1.—Mrs. O., native of and residing at Evans, N. Y.; age, thirty-one years; married eight years, and sterile; she menstruated at fifteen. During the last five years has been failing in health; menses have been irregular and very painful; she is anæmic, emaciated, and has a cough, and she is under the care of a physician, whose diagnosis of her troubles is consumption, and who predicts that she will die when the leaves start, in the coming spring. She consulted me on account of her dysmenorrhœa, which has troubled her since her married life began. On examination I find the uterus retroflexed, the cervix conoidal, and the os so small as to be scarcely discernible. The uterus was replaced by the sound, and Hodge's pessary applied. Dilation of the cervical canal was attempted by sponge-tents, without much effect, or relief to the dysmenorrhœa. Three months after my first examination I made bilateral section of the cervix, afterward applying Scattergood's pessary. The painful menstruation never troubled her again. She became pregnant within six months, and while wearing the pessary, greatly to the surprise, and somewhat to the regret of herself and husband. She was delivered at full term, of a healthy boy, and has since had a daughter. She is a healthy woman, and weighs nearly two hundred pounds.

CASE 2.—Mrs. F., native of and residing at Brant, N. Y.; age thirty years; menstruated at fourteen; married twelve years, and sterile. Her husband had been absent three years of this time, soldiering. She had suffered much during her married life, from dysmenorrhœa, and also from nervous mimicry of "liver complaint," and its radical treatment, having been several times salivated. Her lady friends and physician agreed in the opinion that pregnancy would make a healthy woman of her, and I was consulted on account of her sterility. I found that she was subject to violent attacks of sick headache, had dyspepsia, and more or less constant lumbar and pelvic neuralgia. On examination of the uterus I found a conoidal cervix, with a moderate degree of retroflexion, and some endo-cervical inflammation; the canal was filled with a plug of mucus. She was treated locally, with chromic acid, for three months, with some amelioration of local pains and distress, and improvement of her general health. Not becoming pregnant however, six months afterward section of the cervix was made. In sixteen months from the date of operation she was delivered of a boy. She has since had two children. This lady's change in physique, after the operation and consequent relief of the dysmenorrhœa was remarkable; her sick headaches, "liver complaint," and pelvic neuralgia,

entirely disappeared, and she gained fifty pounds in weight before pregnancy occurred. At the birth of the first child she suffered laceration of the perineum which was promptly relieved by operation.

CASE 3.—Miss M., milliner, age twenty-six years, native of Evans, N. Y.; consulted me on account of dysmenorrhœa. She menstruated at fifteen, and since the age of twenty has had painful menstruation. Her periods were a terror to her, and she was bed-ridden half the time, from the nervous irritation consequent upon the dysmenorrhœa and pelvic distress, with an insupportable feeling of weight in pelvis when standing. On examination I found the uterus retroflexed, the cervix long and conoidal, the os tincæ small, and a contracted cervical canal. Prof. James P. White, M.D., was called to visit the patient in counsel with me, and advised and performed the operation of section of the cervix. No pessary was afterward applied, and owing to insufficient attention after the operation, and to the fact that the os internum was incised, the incision again united, leaving the uterus retroflexed, and a tortuous, cicatrized cervical canal, that was nearly impervious to a probe, or the menses. For the next two years this patient was bed-ridden; the menstrual molimen was attended, at each effort, with pains like, and nearly equal to, parturition, sometimes lasting three days before the appearance of the menstrual flow. She required the use of the catheter twice daily, nearly all of the time, for two years, and the irritation of the uterine disorder upon the nervous centres produced, in time, a nervous imitation of nearly every known disease of various organs. She was visited by many quacks, who all agreed in condemning the operation made by Prof. White. At the end of her first year's rest in bed the uterus assumed its natural position. About this time Prof. J. F. F. Miner, M.D., of Buffalo, was called to visit her with me. Dr. Miner attempted to enlarge the cervical canal with a urethrotome. The result was of no benefit, and another year passed before she would consent to any further use of the knife. During this time dilators of various patterns, and sponge tents, were assiduously used, with but little benefit. At the end of two years from date of first operation, in the presence of Prof. White, I made another section of the cervix. Her next menstruation was painless. The result of this operation could not have been better. A large patulous os, and free cervical canal were formed, and the patient regained her general health, and has never had any more local trouble.

CASE 4.—Mrs. Bohemian, living at Racine, Wis.; age thirty-eight; married fifteen years, and sterile. She is under the care of Dr. A. H. Hoy, who is treating her for dysmenorrhœa by sponge tents, to dilate the contracted cervical canal. This treatment had not had the desired effect, and while