

if I can keep it under observation so as to apply the cautery to any suspicious points at once, I may be able to prolong life by at least two years. Some form of operation, I am convinced, is, however, the only method of treatment that we can adopt with the data at our disposal at present, and yet we have to confess to our patients that our most recent authority, Lambert Lack, states that "it is probable that almost every case of sarcoma of the nose ends fatally," "that in my most successful case of alveolar carcinoma recurrence took place in a little over two years after operation"—while in squamous carcinoma the fatal issue may be postponed four to five years, or even longer.

THE SIGNIFICANCE AND TREATMENT OF UTERINE HEMORRHAGE.

BY WILLIAM EDWARDS FITCH, M.D.,

Lecturer on Medicine, Fordham University School of Medicine; Attending Gynecologist Presbyterian Hospital Dispensary; Attending Physician Vanderbilt Clinic College of Physicians and Surgeons, New York City.

THE history of gynecology is accentuated by progress. In glancing over its pages the student is astonished at the rapid strides made to alleviate the ills of womankind. It is a chapter written within the present century, and written with glowing pen and on emblazoned paper, recording the daring of Dr. Ephraim McDowell, of Kentucky, who in 1809 performed the first laparotomy on a poor woman in the wilds of Kentucky, without anesthesia, an event which marked the beginning of intra-pelvic gynecologic surgery. Perhaps the brightest page in this chapter contains the wonderful discovery of Dr. Crawford W. Long, of Georgia, who on March 30th, 1842, used ether for the first time as an anesthetic, while operating upon James Venable, from whose neck he removed, without pain, a large tumor—robbing, for all time, the operating table of its dreadful horrors. Another page in this chapter records the brilliant labors of the great Marion Sims, a native of South Carolina, who in 1845-9 described for the first time his operation for "vesico-vaginal fistula." He also gave to the profession his "duck-bill" speculum (which bears his name) for the exposure of the fistula with the patient lying in the left semi-prone position. Elsewhere in this same chapter we find a description of "Battey's operation," first performed by Dr. Robert Battey, of Rome, Ga., who on August 17th, 1872, performed the first oophorectomy in this country upon a nervous, hysterical woman, whose menstrual periods, prior to the operation, almost drove her to madness. This operation was successful, adding years of joy and happiness to his former invalid patient.