

and I have always felt that it would have been better to have let her alone.

*Treatment of Placenta.*—In the case on which I operated the placenta was left *in situ*. The opening into the wall of the sac was fastened to the abdominal opening and a Ferguson's speculum was passed in to act as a drainage tube. Symptoms of sepsis developed and irrigation of the sac was carried out at frequent intervals. The placenta came away piecemeal. The sac finally closed and the patient made a good recovery, though the convalescence was tedious.

Tait considered that the umbilical cord should be divided close to its placental origin, that the placenta should be emptied, as far as possible, of blood, and that after washing and cleaning the sac it should be hermetically sealed by closing the opening into it with stitches; and, further, that if symptoms of septicemia arise the sac should be reopened and drained. He had, however, treated three cases in a manner similar to that adopted by myself. They all survived, but only after going through a process of offensive suppuration that lasted for months and that nearly killed them all. Theoretically, the method of closing the sac ought to give good results, but in practice I am afraid subsequent suppuration will be found to occur.

And now, gentlemen, allow me to thank you for your patient hearing. This evening's address has given you the result of part of my lifework. Records have been carefully kept for this purpose and I cannot, in my lifetime, reduplicate them. Lawson Tait, my brilliant and much-admired master, has already passed into the great beyond, but not before he had instilled into me, and into others who had the benefit of his teaching, the habit of keeping accurate records of cases requiring abdominal operations. To this habit you owe the presentation of these cases and the lessons to be drawn from them.

I feel that I have been greatly honored by your Association and will always carry with me a pleasant recollection of its session in 1902.

481 SHERBOURNE STREET.