

no operative procedure had been performed upon the uterus, and are not more than normally frequent here.

"Nine of the 153 women have aborted or miscarried; 5 twice; all before the sixth month; 9 or 14 miscarriages or abortions, considering those induced, for these cases represent all classes of women, is not more than the average percentage in 153 women.

"There were no operative complications, no instances of intestinal obstruction in any of the 465 women. There was 1 death, which occurred 18 hours after a cervical dilatation and ventro-suspension of the uterus, the operation lasting 30 minutes. The post-mortem failed to discover the cause of death, and the conclusion was that death resulted from surgical shock, for there was a rapid, failing heart action. The mortality, 1 death in 465 cases, was therefore a little less than one-fifth of 1 per cent.

"Considering that this experience extends over a period of 11 years and represents an accurate study of 465 cases in which the special method of ventro-suspension of the uterus described was performed, with the fact that 41 of the 153 married women have become pregnant, gone to term and passed through normal labors; that but 9 of the same women have miscarried; that there have been but 5 recurrences of the displacement, always for a sufficient and active cause, and that 95 per cent. of the 272 women responding to communication report complete relief of symptoms or improvement in health as a result of the operation, the conclusion is warrantable that this particular method of performing ventro-suspension is completely satisfactory and its results most gratifying. Its mortality being one-fifth of 1 per cent. in our experience, makes it practically free from danger to life, and no objection can be offered for this reason. Its performance is most warrantable and its sequelæ less frequent than the extra-abdominal operations, such as the Alexander-Adams."

Personal experience makes stronger impressions upon the mind than text-book literature. I have done the operation of ventral suspension of the uterus 24 times in my own practice, and have probably assisted my colleagues in an equal number, making in all an experience of about 48 operations. I have carefully preserved notes of all my 24 cases. In 3 of them I had occasion to reopen the abdominal cavity at a period of nearly three years after the suspension had been done, 1 for appendicitis, 1 for ovarian cyst, and the other for disease of the ovary. In each case the uterus was in good position with a suspensory ligament from 2 to 4 inches in length still