

cated an extended trial in our hospitals of this plan of treatment' and we are glad to notice indications of its being widely adopted by hospital physicians, but scarcely earnestness commensurate with the advantages which we have every reason to believe, from the reported results of its application in Germany, follow its employment. In private practice it is as yet, we fear, not generally understood, and rarely practised.

If the experience of Dr. Wilson Fox, Dr. Weber, and others, be read intelligently, we can hardly fail to recognize the powerful means at our disposal for treating at least hyperpyrexia in acute rheumatism, and it cannot be questioned that we are bound by the evidence before us to adopt the practice thus recommended in hospital and private practice. The propriety of doing so is in many instances a question of life and death, and no fear, trouble, or obstructiveness of friends, should prevent our energetically carrying it out. We are equally bound to follow a similar course in hyperpyrexia in other diseases. No doubt there are many difficulties in the way of an extensive application of this method of treatment, they will be found most pressing in private practice, but they can be removed. When its practical application has been simplified, as it no doubt shortly will be, the use of cold as a therapeutic remedy will, we believe, occupy a most important position in medical, as it already does in surgical practice.—*British Medical Journal*.

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BILLROTH ON OVARIOTOMY.—This eminent surgeon, in his "Reminiscence," published in the *Wiener Med. Wochenschrift*, says of ovariectomy:

First of all, surgeons must dismiss from their minds that ovariectomy is a dangerous operation; and, through the medium of well-informed practitioners, this conviction must make its way with the public. After ovariectomy, skillfully performed according to the rules of art, recovery is the general rule, and a fatal issue the constantly diminishing exception. Comparing it with some other operations, ovariectomy, taking the mass of cases, is shown by statistics to be less dangerous than amputation of the thigh, disarticulation of the shoulder and hip-joints, or excision of the hip or knee. Its danger is about the same as that of amputation of the arm, excision of the shoulder, partial excision