

They should be dressed antiseptically. This can be easily accomplished by having the oil used, slightly carbolized. Carbolized or iodoform or bichloride gauze should be used." *Pacific Record.*

Separation of the Lower Femoral Epiphysis.—Mayo Robson (*Annals of Surgery*, vol. xviii., No. 1, July, 1893), after referring to the scant attention paid to this subject in the text-books, gives cases to illustrate this condition. Extreme direct violence is usually the cause. The displacement depends on the direction of the violence, but also on the attachment or otherwise of the gastrocnemius tendon to the lower end of the upper fragment. The shortening, the projection of the lower end of the diaphysis in the popliteal space, the displacement of the epiphysis on to the front of the femur, and the interference with the circulation, together with the cause of the injury and the age of the patient, form a group of symptoms pathognomonic of this fracture. Robson advises first reduction under an anæsthetic, which might be facilitated by division of the tendo Achillis, after reduction, either the long splint with weight

and pulley or the double inclined plane might be employed. Should reduction be impossible, then excision might be practised; but if the large vessels be ruptured or gangrene occur amputation is the only resource. —*British Medical Journal.*

MIDWIFERY.

The Treatment of Post-Partum Hemorrhage.—Herman (*Revue Médico-Chirurgicale des Maladies des Femmes*, Aug. 15, 1893) states that compression of the vessels is the most rational means of arresting post partum hemorrhage. As preventive means the following considerations should be borne in mind: To render assistance if the uterus is inactive; to pay most minute attention to the details of the third portion of delivery. As treatment he advises massage of the uterus, with the hand placed upon the abdomen. If this is not successful, the introduction of the hand into the uterus to prove conclusively that it is perfectly empty. Finally, injections of hot water within the uterine cavity. If these means fail, persistent bimanual compression of the uterus should be

[OVER.]

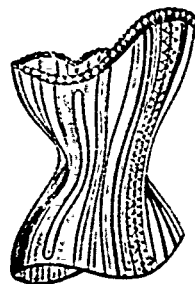
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