

Parvin (Science and Art of Obstetrics, 1895): "Lateral tears of the cervix almost invariably occur in a first labor. Lacerations of the vaginal cervix are physiological in the great majority of cases, neither immediately or remotely demanding professional interference."

Davis (Treatise on Obstetrics, 1896, page 414): "Nervous and anemic women, if they know they have a tear of the cervix, no matter whether it occasions trouble or not, are very apt to ascribe to that lesion pains or pelvic distress often purely neuralgic in character."

Kelly (Operative Gynecology, 1898, vol. 1, page 494): "The mere fact of the existence of a tear, however deep, by no means constitutes an indication for operation. I constantly receive patients who have been sent long distances for surgical treatment of harmless injuries of this kind."

The ovariectomists are more dangerous but fewer. In large cities this class is rapidly disappearing, but in remote places it still flourishes. A patient from a neighboring village in Michigan assured me that nearly every woman in her vicinity, had an operation of some kind, mostly ovariectomy, and that many had mortgaged their homes to pay for it. Recently I attended at a birth where the happy and healthy mother assured me that at a sanatorium in Michigan, eight years ago, she was urged to permit both ovaries to be removed; that the surgeon who wanted to do it claimed eighty-six cases without a death! A young woman of this city suffered from hystero-epilepsy. She was able to assist at housework but her ovaries were removed with a view to a cure and recently she was sent to the Provincial Home for Incurables.

The man who is able to remove with more or less skill the uterus and its adnexa has, unfortunately, a record of so many operations with such a low death rate. He wants more cases and fewer deaths. What a temptation to extirpate a comparatively healthy uterus. Against this sort of thing Dr. Kelly devotes an interesting chapter (vol. ii. page 163). He says: "Gynecological conservatism has come to have a new meaning within the past ten years. It is now the distinctive attitude of the newer and better surgery as contrasted with the widely prevailing radical methods of the last decade. Conservatism is the effort to spare as much as possible of the pelvic organs during an operation."

Operative skill alone cannot make a man a competent specialist. He should be a physician of experience, sound education and good judgment.

I do not pretend to say when to operate and when not to do so, nor do I question the wonderful benefits which so often result from surgery in gynecology: but I protest that the influence of other pathological causes is overlooked and neglected, and that before