

ELEMENTS OF SUCCESS IN SURGERY.—Cordier concludes an article on this subject with the following deductions: (1) The field of surgery is a vast one, and is best covered by the specialist in some of its departments, the eye and ear especially. (2) Surgery and medicine should go hand in hand in the treatment of border-line cases, but should be divorced in the strictly surgical or medical cases. (3) The selection of a surgeon for a given case should be made from no other standpoint than that of his recognized ability. (4) A surgical operation should be performed as quickly as possible, consistent with good and completed technique. (5) All unnecessary and rough handling of important tissues should be avoided. (6) Careful, short anesthetics will help to keep the death-rate low. (7) Careful hemostasis, with proper ligature material, is an important element in successful surgery. (8) Thorough aseptic technique should be carried out, and may be obtained either with or without rubber gloves and mask. (9) Lawn tennis suits and gloves are only too often the avenue leading to wound infection. (10) Short post-graduate courses instill false surgical confidence, and lead to many surgical disasters. (11) Honesty and sincerity should ever be the keynote in deciding as to the advisability of performing any surgical operation. (12) Mental tranquillity of the patient is of much importance preceding the performance of some surgical operations.—*The Lancet-Clinic.*

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THE TREATMENT OF ABORTION.—In concluding a very complete and comprehensive article, Stowe, in *Surgery, Gynecology and Obstetrics*, calls particular attention to the following points in the treatment of abortion:

1. The importance of treating all cases of uterine hemorrhage accompanied by intermittent pelvic pain in a woman of child-bearing age as acute abortion.
2. The value of absolute rest in bed in the treatment of threatened abortion until all pain and bleeding have ceased.
3. The necessity of saving as much blood as possible to avoid a long period of anemia and prostration.
4. The selection of cotton pledgets in lieu of gauze strips as a material for vaginal tamponage.
5. The use of finger curettement and manual removal of the uterine contents whenever possible.
6. The performance of Hoening's abdomino-vaginal compression when the conditions are present.
7. The difficulty of complete sterilization of laminaria tents.
8. The danger of perforation of the uterus with steel dilators and sounds.