In a case like this never promise a cure, for in six months your patient may be no better than she was at the beginning of the treatment, and in that case she will be very apt to reflect rather severely upon you. I believe that Battey's operation has a brilliant future before it, but I would by no means think of resorting to it here, because the patient is not suffering nearly enough to justify us in adopting such an extreme measure. In another case which I have, however, I am thinking of trying it. Both ovaries are irremediably affected, and the patient is bed-ridden in consequence. already performed the operation once, and am quite willing to undertake it again. case I should advise that electricity be given a trial, and preferably in the form of the constant current, two or three times a week. One sponge electrode should be placed under the affected ovary, and the other on the abdomen above. and to the left of the symphysis pubis. dition, whenever the patient feels the approach of a menstrual period she should immediately go to bed and remain there. As soon as the flow is over (the time when she suffers most), she should keep a large hot-water bag over the abdomen, and occasionally apply it to the spine I have not much confidence in medication in cases of this character; but there is one agent which I use a good deal, and which, in some instances, seems to act quite nicely, and that is the bromide of ammonium. She might take from ten to fifteen grains of this three times a day in some bitter infusion, before, during, and after the menstrual flow, and she ought also to keep her bowels somewhat relaxed at that time, so as to prevent the pressure of fecal matter in the rectum upon the ovary. She should abstain altogether from intercourse with her husband, and were she a patient in the higher walks of life I should recommend a change of air and the entertainments of travel. The latter means often proves of more service than any other in these cases.—Med. and Surg. Reporter.

Zoga reports a case of aneurismal varix between the left brachio-cephalic vein and the arch of the aorta, caused by an aneurism of the arch of the latter vessel adhering to the former.

SOME HINTS REGARDING UTERINE SUPPORTERS.

BY CLIFTON E. WING, M.D., BOSTON.

Dr. Wing is out again on the supporters, when used by competent hands. He writes pleasantly and well. Among other things, he says:

"The adjusting of a pessary which shall be worn for an indefinite time, until its objects have been attained, is not always a matter to be accomplished by once or twice seeing the patient, although some simpler cases require but little more attention, but often a process which must extend over weeks and perhaps months, and which requires the closest attention on the part of the operator to avoid injuring instead of benefitting the woman.

"That this fact is not appreciated by the profession at large is evident from the number of patients sent to the specialist, who come expecting to have a supporter applied, leave the office in a few minutes, and have no further trouble about the matter. Occasionally this can be done, but such cases are exceptions to the rule.

"When a uterus has been out of its proper position for a length of time, the tissues and parts about it accommodate themselves to the new position it has taken.

"We all know how easily a recent uncomplicated dislocation of the shoulder or hip-joint can be reduced by proper manipulation, and how difficult may be the process of reduction when the dislocation has become of long standing, and the surrounding tissues have become habituated, so to speak, to the malposition.

"It is exactly the same with a uterine displacement. When the womb has been but recently thrown out of position, it can often be easily replaced and retained where it belongs. When the displacement is of long standing, frequently the process of reduction is a very difficult matter. Hence the importance of early recognizing and treating these conditions. A complete replacement, in many instances which present, cannot be accomplished at once; the parts can only be carried back where they belong gradually. Oftentimes continued pressure must be used to do this, and must be kept up afterward to hold them in place until they