Gynaecology.

Malpositions of the Uterus.

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The anterior vaginal wall and the utero-sacral ligaments form an elastic beam across the pelvis upon which the uterus is suspended, and this beam is partially supported by the posterior vaginal wall, the two walls being in apposition. Unless there is excessive strain or force applied from above, this beam is quite able to support the normal uterus, even when unaided by any other structure.

Of all the uterine ligaments, the utero-sacral are the only ones which are constantly taut, these being chiefly instrumental in the uterus normally retaining its position of slight ante-flexion. The broad and round ligaments are, on the other hand, usually relaxed, when the fundus is lying forwards. This fact allows of the free mobility of the uterus and therefore of this latter organ really having several normal positions, according to the position of the patient and the condition of the bladder or rectum. For this reason, any operation which fixes the uterus in one definite position is faulty.

The axis of the superior strait of the pelvis is the physiological area of uterine movement and is consequently of importance in labour. The uterus is displaced, when it takes up a permanent position outside of this physiological area, and the development of symptoms depends upon the power of resistance of the organism. (This is no doubt true, as is evidenced by the fact that an extensive displacement of the uterus may often be found in one patient who suffers no inconvenience from it while in another individual a slight misplacement will cause severe symptoms which entirely disappear upon the cure of the pelvic condition.)

For the normal working of the mechanism of the uterine support