

cauterisation for ulcerations on the neck of the uterus; and he avoids them on two accounts: first, because there are various inconveniences that arise in cases where, as in the patients that present themselves at these consultations, many of whom come from a distance, the women are unable to rest immediately after the application of the cauteries; and secondly, because he thinks other means can be adopted in their stead. M. de Saint-Germain makes great use of medicated bags (*sachets medicamenteux*). These are small cylinders, five or six centimetres in length (3 inches), a little larger than the thumb, made of gauze, enclosing dry linseed meal. These are introduced and allowed to remain in the vagina after having been dipped in glycerine mixed with various remedial agents. When he treats ulcerations of the neck, which is itself more or less hypertrophied, and accompanied by more or less discharge without so much pain, the sachet is dipped in a fluid composed of a solution of 12 parts of tannin in 100 of glycerine. This is pushed on to the extremity of the speculum, and applied to the neck, being kept in position by some charpie which is well pressed in. It is allowed to remain in position for three or four days, and then withdrawn by means of a thread attached to the bag. The vagina is well washed out, and a fresh sachet introduced. This simple mode of dressing is very useful in a large number of other cases, as for example in vaginitis. It can be advantageously applied after slight cauterisation has been made with nitrate of silver or other substance. It may even prove of service in cases of retroversion. It is then, however, only a palliative, but the introduction of a plug dipped in glycerine and tannin into the posterior cul-de-sac gives great and immediate relief. Where the ulceration is accompanied by great pain, the same kind of sachet is introduced, only dipped in a solution of 8 parts of extract of belladonna in 100 of glycerine, instead of the tannin and glycerine. One of the patients complained of abdominal pain, of acute pain during intercourse, and of abundant discharge. Vaginal examination demonstrated the presence of a slightly enlarged neck of the uterus, with slight ulceration, very free uterine catarrh, and the hysterometer that the cavity of the neck was enlarged, and brought away a little blood. M. de Saint-Germain prescribed (1) that the patient should take every morning fasting a teaspoonful of white mustard-seed, in half a tumbler of fresh water; (2) a starch bath (*laine amidonnée*) every other day; (3) injection of infusion of walnut leaves (*feuilles de noyer*) three times a day; (4) linseed meal poultices to the belly every night on retiring to rest; and lastly, of hop tea three glasses a day (*tisane de houblon*).

2. *Leucorrhœa*.—In severe cases of leucorrhœa without manifest lesion, M. de Saint-Germain simply orders sulphur baths and free injection with the water of the bath. He has obtained great advantages from this, and even recommends it for young girls, using sufficiently small canula.

3. *Cancer*.—The following prescription was ordered for a case of uterine carcinoma. It comprehends disinfectants, tonics, and also iodide of

potassium, so that in the event of the surgeon being mistaken in his diagnosis no chance may be lost:—(1) Injections of chlorinated water three times a day; (2) a sulphur bath every other day; (3) a spoonful of solution of iodide of potassium internally every morning and evening, containing a grain or two of the salt; (4) every morning fasting a spoonful of cod-liver oil; (5) infusion of gentian, three glasses per diem. (*Journal de Médecine et de Chirurgie*, Lucas-Championnière, tome xlv, 1873, 2 cahier.)

#### CONVULSIVE DISEASES OF WOMEN.

Dr. Barnes, in his Lumleian Lectures on this subject, stated the following propositions, as containing the main facts known in regard to the convulsive diseases of women.

1. Pregnancy and labour require for their due fulfilment an extraordinary supply of nerve-force.
2. This extraordinary supply of nerve-force implies a corresponding organic development of the spinal cord.
3. The provision of an extraordinary supply of nerve-force implies a greatly augmented irritability of the nervous centres, rendering them more susceptible to emotional and peripheral impressions.
4. The disturbances in nutrition, occasioned by pregnancy, almost always entail some alteration of the blood, which increases the irritability of the nervous centres, and favours the evocation of any latent convulsive or other nervous diathesis, as chorea, epilepsy, or vomiting.
5. When the blood-change wrought by pregnancy is marked by albuminuria, a poisonous action of peculiar intensity is exerted upon the nervous centres tending to produce eclampsia.
6. Obstinate vomiting in pregnancy probably sometimes proves fatal, by the development of an unknown organic or systematic morbid process.
7. Menstruation resembles pregnancy, in giving rise to an exalted central nervous erethism, and ovulation is a primary exciting cause of epileptic, vomitive and hysterical convulsions.
8. At the climacteric age, again, there is a renewed susceptibility to convulsive diseases.
9. Pregnancy, by evoking or producing convulsive diseases, under certain known and passing conditions, puts to the test the various theories of the pathogeny of these diseases.
10. The rational treatment of these diseases in women, must take into account the two great factors in the production of these diseases, viz.:—an exalted nervous irritability under the stimulus of the reproductive function, and lowered or empoisoned conditions of the blood.—*Obstet. Jour. Gr. Brit. and Ireland*.

#### SURGERY.

##### NEW METHOD OF PERFORMING AMPUTATIONS.

At a surgical *clinique* at La Pitié, Prof. Verneuil advocated the following method of removing limbs, calculated, he thought, to do away with arterial compression, whether by fingers or tourniquet, which is frequently inefficient, and is an exciting cause of phlebitis and sloughing of the

integument from pressure, especially in patients who are fat. Flexion of joints, in the cases of the elbow and the knee, will frequently suffice to control hæmorrhage when amputations are made below these points; but by the method advocated by Prof. Verneuil, in which the limb is treated as a tumour would be, the hæmorrhage is reduced to a minimum. When antero-posterior flaps are formed, a common bistoury is all that is required for incising the soft parts, which are divided in successive layers, the blood-vessels being ligated as they are met with, and before being divided. Veins as well as arteries are closed with ligatures. The bone is divided as in the usual methods. When the principal blood-vessels are so located that they can be included in one of the flaps, it is the practice with the Professor to divide the bone before forming this flap. Twenty-one cases are reported as having been operated on by him in this manner, viz.: Eight disarticulations at the shoulder, three amputations of the thigh, two amputations of the arm, six amputations of the leg, and two coxo-femoral disarticulations. He recommends this method as having the advantages: 1, of enabling the surgeon to operate with fewer assistants; 2, the avoidance of hæmorrhage; 3, obviating the risk of phlebitis from the pressure necessary to control hæmorrhage.—*Gaz. Med. de Paris*.

#### ON THE TREATMENT OF GONORRHOEA, AND ESPECIALLY GLEET BY MEDICATED BOUGIES.

M. G. Lorey gives a detailed result of eighty cases of acute gonorrhœa, and of twenty cases of chronic gonorrhœa treated with Reynold's medicated bougies at the Hôpital du Midi. The bougies are made of gelatine and gum; the gelatine forms the skeleton, the central and resisting portion; and the gum mixed with the remedial agent, is spread on the surface. They are about six inches in length, and of a diameter of about one-fifth of an inch. Their consistence varies with the temperature, more or less soft; but by dipping them in cold water they can be readily passed into the urethra without causing pain. M. Lorey has found opiated or belladonized ones very efficacious against chordœ; each one contained about three-fourths of a grain. Almost immediately after the introduction of the bougie the erection subsided, and subsequent micturition was less painful. In the first stage of acute gonorrhœa, he has obtained the following results: 1. It renders micturition painless, or comparatively so; 2. It allays or prevents chordœ. But, in the second period, the belladonized sulphate of zinc bougie has not been as efficacious as anticipated. However, it presents the following advantages: 1. Its use is more simple than the injection; 2. Under certain circumstances it permits the discardure of the use of injection; 3. As they require an hour to melt in the urethra, their therapeutical action on the urethra is prolonged. The observations made on sixty cases led him to arrive at the following conclusions: The opiated or belladonized bougies are indicated in the first days of a gonorrhœa, to allay and prevent chordœ, to render micturition painless; they have a double