cancerous. Splitting the uterus often facilitates matters. He always puts in a self-retaining catheter. Douching is unwise until after four or five days when he begins, with simple water. In a week or ten days the wound is healed up.

When larger than your fist—remove by abdominal route. The Trendelenburg position is the one used, putting patient in that position after being etherized. We can do everything when we are clean and nothing when dirty. Simplicity is just as well as elaboration and we should get along well with Arnold's sterdizer. He always wears rubber gloves in operating, they keep the patient from contamination from the operator and the operator from contamination from the patient. Be careful when opening into abdomen not to open into bladder. He generally leaves the os and neck in uncomplicated cases. As a general rule these tumors are free from adhesions. Sometimes, however, there are adhesions. One case he lost there were adhesions to intestines and pulling up tore the intestines and lost the patient.

Assistant pushes down parietes and operator lifts up tumor with a corkscrew. Dissects out uterine arteries, ties them, and removes uterus. He uses silk, as has not confidence with catgut; you are sure you can get silk clean. A continuous suture is made and the self-retaining catheter is put in. Hot water bottles applied, but not next to patient, for he has seen several severe scalds. Before beginning always have the uterus curetted and cleaned as much as possible.

Another subject — Hamorrhage from uterus. It is caused by endometritis, fibroid projecting and cancer. You etherize and examine. If cancer you remove. Glandular cancer is often cured, but doesn't believe epithelial form is ever cured, as may return perhaps to some other organ, from one to eight years afterwards. If endometritis and patient gets curetted, and application applied and patient doesn't get cured, may then suggest removal of uterus even when not of malignant disease. One case of small fibroid causing severe hamorrhage in a woman aged 63 years. Couldn't detect fibroid—being so small. Uterus was removed with good recovery. Another case of fibroid where woman died and cause was found tobe due to a putrid fœtus in the uterus.

Another subject referred to was the radical cure of hernia. He likes Kocher's operation very much.

Drs. Muir, Taylor, McKay, McLeod and Conroy made a few remarks concerning Dr. Homans' address.