

Dr. PROTHEROE SMITH, of London, Eng., referred to the fact that bleeding was very common in his younger days, and said he thought that the discontinuance of bleeding, by favouring congestion of internal organs, had made ovarian disease much more common in recent years.

Dr. FULTON, of Toronto, asked Mr. Tait if there were not cases in which tapping for the purposes of exploration was admissible? And if in some cases where there was extreme distension of the abdominal walls, it was not safer to withdraw only a portion of the fluid at first to reduce the distressing symptoms?

Mr. LAWSON TAIT, in reply, said that as Sir Spencer Wells had never been reticent in knocking other people over the knuckles, he must not expect to escape from similar treatment. Doubtless Sir Spencer would continue the discussion after his own fashion. Mr. Tait had only to say that any criticism he had ever made of Sir Spencer Wells was with most friendly intentions, dictated by an intimate acquaintance extending over many years. Dr. McMillan and Dr. Hingston had both somewhat misunderstood what he had said about operations performed in the absence of physical signs. Those cases were absolutely limited to three cases of epilepsy and about three others in which the operation was urged, and the whole responsibility of its performance was accepted by the medical attendant in charge of the case. Such an instance was published by Dr. Ertulby in the *Lancet* about three years ago. Dr. Ertulby pressed me to perform the operation, and undertook its whole responsibility. As we found double pyo-salpinx, the operation was entirely justified. The real protection alike of patient and surgeon is the introduction of the family physician, by whose concurrence the possibility of the performance of an unnecessary operation would be reduced to a minimum. It must, however, be remembered that surgeons who practise this department of the profession are as fallible as other human beings, and that with them mistakes must surely occur. They are to be judged, and their works also, by the same standards as are applied elsewhere, and not by others of an unjust or more exacting character.

In answer to Dr. Gardner, he (Mr. Tait) would say that his own experience was wholly in favour of removal of the uterine appendages as a far more safe operation than enucleation. Not only so, but as he had published cases where fresh tumours had grown after enucleation and removal of the appendages was ultimately required, he thought that the latter operation was in every way preferable. Like his friend, Dr. Protheroe Smith, he carried a lancet, but only as a surgical curiosity; he had