turpentine; avoid opium; see that the bladder is emptied (if necessary) with a clean catheter; and keep the stomach empty if vomiting occurs.

The main points are :-

- τ. Be sure of your diagnosis, and that the operation is not put off until the woman is nearly exhausted.
- 2. Be scrupulously clean, and allow only plain water to come near the peritoneum.
- 3. Remain with the patient for the first twenty-four hours, to control hemorrhage if it occurs.
- 4. Use common sense, and follow ordinary surgical rules here as you would anywhere else. Dismiss the peritoneal bugbear from your mind.
- 5. Remember that purging can do no harm, and that to combat peritonitis successfully you must keep ahead of it and prevent tympanitis by early purging. If tympanitis becomes pronounced the intestines will not act to all the purgatives the patient's consequent vomiting will permit her to retain.
- 6. If no trained assistance is to be obtained, remain with your patient for the first four or five days, carefully guarding her from clumsy meddlers.
- 7. Let the clamp come away itself; take out every alternate stitch on the sixth or eighth day and the remainder a few days later, and dress with zinc ointment.

(Since the above was printed we have received a correction from Dr. Ross, as follows: "to save a long incision in the abdominal wall Mr. Tait passes the rubber over the uterus while it lies in the belly, and does not bring it forwards until after the incision in the uterus has been made and the child extracted. The uterus of course then contracts, preventing much bleeding, and can be drawn out of a much smaller incision."—ED.)

EXTRACT FROM AN ADDRESS TO THE OTTAWA MEDICO CHIRURGICAL SO-CIETY BY THE PRESIDENT. DR. A EAUMONT MALL, OTTAWA.

THE first part of the address dwelt upon the work of the Society and other subjects of local interest.

"Scattered throughout the annual Departmental | disease.

Reports there is much that should interest members of our profession. A casual glance over an occasional one that happens to fall into our hands is perhaps dry and uninviting, but if followed from year to year, and those of the several provinces compared, they supply a fund of information that should be in the hands of every one of us. In many there is an element of unreliability, and nearly all are devoid of the exactness and thoroughness that would be present if prepared under the supervision of one of ourselves, but with all such drawbacks they are well worth studying and finding a place for in our libraries.

Of the reports issued by the Dominion Government the most important is that from the Department of Agriculture, and Statistics, bearing the title—an Abstract of Returns of Mortuary Statistics. The last volume is the fifth. the returns from twenty-six cities and towns are published, and we may there learn the number of deaths in each, the causes, age, sex, marriage state, religion, origin and occupation; diseases in their order of fatality and deaths of illegitimate children. The total number of deaths in Ottawa was 313. The most common cause is shown to be diarrhoeal affections, 145; the next in order is phthisis, only 61, showing clearly that preponderance of infantile mortality which keeps up our high death-rate. This is readily accounted for when we turn to the list of deaths of illegitimates, where we find that 102 occurred in Ottawa; only two other cities exceeded the hundred, Montreal and Quebec. Toronto, with its much larger population, had only 62 deaths; Hamilton, 13; London, 6. As we are well aware that these unfortunates are simply left within the limits of our city to die, we need feel no alarm at what is made to appear an unusual civic mortality.

The classification adopted attracts our attention, particularly the grouping of worms and alcoholism in the zymotic class. I think it is generally understood that the zymotic diseases are those due to a germ, introduced from without. Our statistician, however, in common with many others, does not limit its meaning, but includes all causes introduced from without. Tubercule is maintained as a constitutional disease