and had replies from 272 of them; 94 per cent. of those who replied were either restored to excellent health, or good health, or improved in health as a result of the operation of ventrosuspension alone, or combined with other operations required on the appendages or perineum and cervix. About a dozen of the women said the uterus had gone back, but in an examination of two of these, the uterus was found in good position. The report of recurrence came chiefly from women who had since borne children.

Beyea reports a personal knowledge of five cases of recurrence. In three it occurred before the patients left the hoshital, in two as a result of coughing in an attack of pneumonia, and in the other the attachment was separated by the resident physician in removing the sutures from the cervix. In another, the woman, regardless of advice, took up heavy household duties immediately after returning home, lifting an 18 months' old child several times a day. In the fifth case the uterus was found retroverted to the second degree, and on opening the abdomen again the ligament was seen attached to the *anterior* surface of the uterus well below the fundus, which doubtless accounted for the recurrence.

I here quote from Dr. Beyea<sup>13</sup>: "The important question, the influence of this operation on the course of gestation and labor, I wish to particularly call to your attention. Of the 272 women, 153 are now at the time of this study, married; this number including such as have had operations on the tubes which might render them sterile; 119 are single or widowed, or the operation rendered them absolutely sterile.

"Of the 153 married women, 41 have been pregnant since operation; 37 have gone to term and borne a living child; 5 have twice borne a child; 2 have given birth to twins; 1 twice. One woman died of eclampsia following a normal labor; in 4, instruments were used at birth; once for posterior rotation of the occiput; in 1, there was an unusual, but not sufficient to be termed post-partem, hemorrhage: in 2 the labor was long and difficult, one lasting three days, and in one there was hemorrhage during pregnancy, the cause of which was not determined. In none of the 47 labors as described by the patients and the attending physician was there complication which could be attributed to the operation. It was thought possible that the operation was the cause of the hemorrhage in the one case following labor, but there was no proof.

"As to the other complications, the use of forceps and long labors, they are complications which are not infrequent where