as four hours. This is more than human flesh and blood can stand, for every one of such eases of which I have had cognizance has died. When we remember the profound degree of narcosis necessary during the whole continuance of abdominal section, and that the delicate peritoneum is being roughly handled most of that time, we can hardly expect that the result will be otherwise than fatal; so that it has become pretty generally understood that one of the most important elements of success is speedy operating. We find that those who have death rates of three to five per cent. are operators of great skill and experience, who have reduced the time for a given operation.minute by minute, until what would take an unskillful operator an hour, perhaps they can do in twenty minutes. One might almost formulate the rule that any abdominal operation which is going to require profound anæsthesia for more than an hour had better not be done at all, or had better be stopped when the hour is up.

I never had oceasion more than once to admire the judgment of celebrated operators, who, in the presence of adhesions which it was impossible to detach within an hour, had the courage to stop the operation and save the patient's life; while more than once I have felt sorry to see what would otherwise have been a fairly successful operation turned into an inevitably fatal one in the hopeless endeavor to make it perfect at the expense of the patient's life. Any saving in time, therefore, which can be attained through skill in technique and strict attention to business, contributes greatly to the success of the results; and for this reason conversation or anything else on the part of visitors and assistants which would take up a single moment of the operator's attention or distract it from the work he has on hand, or even the delivering of a practical lecture during the course of an abdominal operation is to be deprecated, for there are few people who, like Julius Casar, can do seven things at once; and while they are telling a story or listcning to a joke or delivering a lecture, they are losing at least a few precious moments, and add so much to the risks from prolonged anasthesia. When the patient's abdomen is sewed up, and the anæsthetie discontinued, then and not till then should a single word be uttered.

The Care of the Intestines.—The fourth element of success is the eare of the intestines, the most important point in which is, in the words of one of America's most celebrated operators, that one should never see them; and I have many times tested the truth of his proverb. If I do not see the intestines once during the operation I feel very little anxiety about their management afterwards; while if the intestines are seen during the operation, or still more so if they escape from the abdomen and are laid out on the abdominal wall or on the table, no matter how they are protected with hot towels or oiled silk, I know that there will be great trouble in managing them afterwards. Whether this is due to paralysis of the great sympathetic nerve by exposure to