the opinion that, if the entire growth has not been removed, the patients suffer much more than if no radical operation has been performed. In my experience, the patient in the late stages is no more prone to pressure symptoms than is the woman who has not been operated upon. On the other hand, frequently the growth spreads in such a manner that the vaginal mucosa is not again involved. and the patient is accordingly spared the frequent hæmorrhages and the foul-smelling discharge. I am frank to admit that in some cases I would have refrained from operating had I been aware of the widespread extension of the disease; but sometimes, when tihe growth is not very dense, the extent is only ascertainable when the operator has partially completed his dissection, and complete removal of the uterus cannot then be avoided.

## DEDUCTIONS

It is difficult to lay down a hard and fast rule as to what cases should and what cases should not be operated upon. All familiar with the course of this dread disease know that in time the hæmorrhages become very severe, and that later on, in the intervals between hæmorrhages, the patient has a most foul and loathsome discharge, and that in some cases rectovaginal or vesicovaginal fistulæ or both may develop. They also know that the patient becomes a burden to herself and a source of the greatest anxiety to her family, who are powerless to do anything; and, finally, that most painful pressure symptoms may develop. With such an outlook, I feel sure that there is not a man in this audience who, if brought face to face with such a problem in his own family, would not gladly take the chance of an operation, if there were only one or two chances in a hundred; as a matter of fact the chances are infinitely better.

Over a decade ago, when speaking before the Academy of Medicine in this city on the early diagnosis of cancer of the uterus, one of the most distinguished gynecologists of New York, in the discussion, said, if I remember correctly, that he had operated on over 120 cases of carcinoma of the uterus, and that at the time of the meeting not one of them was

living.

The splendid results obtained by Wertheim and others in Europe leave no doubt that great strides have been made in the cure of cancer of the uterus, and even from the limited observations in America, it is clear that considerable progress has been made, and there is no reason why we should not materially increase our percentage of permanent cures. The Germans certainly have one advantage over the American surgeons. Many of their patients have had large numbers of children and, owing to their manner of work, have not accumulated the large amount of adipose tissue that is so prevalent with us. Consequently the continental operator can at once secure a much better exposure, and is not troubled with the abundance of adipose tissue around the ureter and in the broad liga-

The oftener the surgeon performs this operation, the more expert he becomes; the length of the operation is shortened, and consequently the death rate is lowered. The German surgeons apparently see many more of these cases than surgeons in this country. During my last trip to Germany, I was making rounds with Professor Zweifel, in Leipzig, and he told me that in one month he had performed fifteen Wertheim operations for cancer of the cervix. It is, therefore, only natural that the German surgeon should have a lower operative mortality. Again, the continental surgeon has materially profited by the widespread publicity which the cancer problem has received, both in the profession and among the

From time to time attempts have been made in America to start an education of the women of this country to the necessity of reporting any suspicious symptoms at once to their physicians, but, apart from some spasmodic efforts, nothing has really been accomplished. It would be most fitting if this splendid society should here and now start a cancer campaign that would extend from coast to coast. It can and should be undertaken at once. Publications that have done much to enlighten the laity on medical matters could be of invaluable service in the dissemination of this knowledge.

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The laity now have a clear idea of the sub-