

and the large electrode may be placed over the shoulders and the child allowed to lie on it. The larger and more deeply-seated nævi will require stronger currents and several treatments. The smaller nævi may be allowed to dry up and fall off after operation. An excellent dressing is flexible collodion, which may be tinted with carmine so as to form an almost imperceptible coating if the nævus is on the face.

*Subcutaneous erectile tumors* and *sebaceous cysts* yield readily to the negative puncture also. In all these cases the small gold needles are to be preferred, and should be insulated to within a short distance of the tip. In this way their action is not spread through the surrounding skin. Gold is chosen on account of its greater conductivity and flexibility.

In *malignant tumors* much may be expected of electrolysis, but here again the greatest care is required. In *epithelioma*, especially of the face, it possesses marked advantages over removal with the knife; namely, less tissue required to be removed, no hemorrhage, no stitches required, the surface left after the operation is in the best possible condition to prevent absorption of cancerous or septic material, and there is little resultant deformity, or none at all. I prefer to use a positive needle thrust into the tumor, and one or two negative through the sound tissue at its base and parallel to the positive, and a current of twenty or thirty milliamperes, the position of the negative needles being changed frequently till the growth comes away *en masse*. A simple carbolated dressing is all that is required.

*Indurated glands* require the negative puncture.

*Goitre* has been a rather prolific field with me. In all cases the oblong electrode is positive and placed behind the shoulders. At the site of puncture a hypodermic injection of from five to ten minims of a mixture of 5 per cent. cocaine and 6 per cent. antipyrin in distilled water is made. The growth is then steadied with the left hand and the patient directed to swallow several times, to aid in mapping out the boundaries. A steel needle negative, insulated to within a couple of inches, or less, of its tip, is introduced through the isthmus into the lobe which is most enlarged, and the current turned slowly on. We can start with ten milliamperes for ten minutes, and at future

seances may go up to fifty or more, but this is rarely necessary. Subsequent punctures, as a rule, may be made through the first opening, the needle being thrust into different parts of the lobe, or into the other lobe when it is enlarged. Seances may be once a week, though when pressed for time they may be three times a week in some cases, but the former is preferable. The wound may be dressed with iodoform and boracic on alembroth gauze, retained by a narrow adhesive strip.

*Cystic goitres* are the most amenable to treatment. Use an aspirating needle insulated to within an inch of its tip, evacuate contents of cyst, reinject a solution of chloride of sodium to distension, connect needle with negative wire, and use a current of about thirty milliamperes for fifteen to twenty minutes; turn off current, empty sac, apply iodoform and boracic dressing, and compress with broad adhesive strip. Two or three applications will sometimes effect a cure.

In *hydrocele* a similar treatment has been successful.

I have not alluded to the use of electrolysis in the removal of exudations by absorption, the treatment of fistula in ano, or of fistulous tracts in other places, or of ulcers, yet in all these it is of the greatest value; and there are a great number of other disorders that it may be relied on to cure, if cure is possible. I should also like to have given the treatment more in detail, and introduce cases of cures, but the object is to instruct, not to weary.

In conclusion, let me say that our greatest successes with electrolysis will be found when we work along the lines of trying to assist nature, not to combat her. Watch her reactions carefully, then, and be guided by them as to what strength of current, and how long, and how often to use, and when not to use at all. In electricity we possess a most powerful agent for weal or for woe. That we have ignored it so long is not greatly to our credit as a progressive profession. The commercial world has not been so slow to recognize its value, and see what results! It has revolutionized, and is still revolutionizing. Let us, then, make amends for the past. Who knows but that it may revolutionize many of our own fields, and perchance remove some of the reproaches that rest on the noblest profession in this fair world?