

happened the disease may be delayed, and life made tolerable for a long time, by destroying the diseased tissues with the "Paquelin's cautery," and then carrying out the dry treatment with insufflations of iodoform, and plugging the vagina with tampons of sublimated absorbent cotton. We have at present a case under our care where the disease completely fills the pelvis, and yet the patient only requires treatment every five or six days. Fritch employs iodoform gauze, and he says that it relieves the pain, foul discharges and hæmorrhage so that the patients think they are well.

Dr. Chauvin, of New York, recommends Alveloz which has the power of diminishing to a marked degree the amount of the discharge, and rendering it decidedly less offensive.

Dr. Carpenter, of Cleveland, says that Lactic acid has the power of dissolving sloughing tissue, leaving a healthy, granulating surface. It is applied freely on absorbent cotton, and then washed off.

The Gynecologist often needs to know whether the uterus is gravid or not, and sometimes this is a difficult matter to decide. We recently had a case of fibroid sent to us for Apostoli's treatment, and having just previously read an article by Dr. McKee, of Cincinnati, on the characteristic color of the vagina in pregnancy, we were able to state our opinion to that effect at the first examination. It may be described as greyish purple, or dark purple. Dr. Z. W. Farlow (*Boston Med. & Surg. Journal*, July 21, 1887) calls it a blue color, and he gives the following analysis in 141 cases:

- 36 no color.
- 55 color suggestive.
- 70 color characteristic.

In our case an abortion a month after beginning the treatment bore out our conclusion. In this case we went on with the treatment with our eyes open, because she was so much reduced by suffering that her life was in danger, and her abdomen was so distended with fibroids that the uterus could not expand much further. Besides, she had come a journey of nearly a thousand miles to be treated with electricity, and was determined not to go back until their growth was stopped. The tumors are diminishing, and she has passed through the miscarriage at five months safely and without any hæmorrhage whatever, although she suffered severely from the dragging on the adhesions of one of the tumors to the abdominal wall, caused by the return of the uterus to its non-pregnant size.

She would probably have miscarried soon at any rate, and now the tumors will be rapidly reduced in size by the electric current.

Dr. Weeks reported a case of myoma in a pregnant lady, where after consultation an abortion was brought on, and which was followed by death. In that case there were no urgent symptoms for interference, and we thought it would be better to leave such cases alone until after delivery; for as Dr. Reed (*Cincinnati Lancet-Clinic*, Dec. 3, 1887) says many women not only go through their pregnancy and delivery without any trouble, but their fibroids participating in the general resorptive process of involution sometimes disappear.

Apostoli's treatment not only bids fair to completely do away with the knife in the treatment of fibroids, but also promises to throw considerable light on their nature and cause. We know that the uterus will become heavy and indurated whenever the processes of nutrition and circulation are slow, and a section of such an organ reveals an abnormal amount of fibrous tissue. And it is no longer a theory but a fact that this exudated fibrous tissue can be called back into the circulation under the stimulating influence of the galvanic current, so that the organ becomes soft and muscular. To us it seems that a fibroid tumor is but a deposit of lymph which has exuded from the vessels under the influence of a tardy vital power and circulation. Under certain conditions of improved health the trophic nerves call back this exudation into the circulation, while in others this can be done artificially by the aid of electricity. As an instance of this we may cite a case under our care, and which will be reported in due time, where a uterus which was hanging several inches outside of the vulva and into which the sound entered five and a quarter inches, has with less than thirty applications of the galvanic negative current been so much reduced in size, that the sound only enters three inches, and the weight is so much less that it can very rarely be seen at the vulva at all.

The teachings of Macan, Master of the Dublin Rotunda hospital, are beginning to make his British brethren realize that the uterus has no fixed position either antero posteriorly, or with regard to its height in the pelvis. We have long held this view, that the organ is never for ten consecutive seconds in the same position. It is carried backwards when the bladder is full, and forwards when the latter is emptied; and in the same way its posi-