sities, when he will be promoted one or perhaps several steps at a time. When I called upon Hofmeier a day or two after his appointment he was all ready with his effects packed prepared to march on the morrow. In the same way Olshausen walked into the Women's hospital a few days after leaving Halles and began operating as if he had been working in the same theatre all his life. He brought his own first assistant with him, Dr. Thorn, who will in turn be promoted to Giessen when Olshausen dies, but the other five assistants of Schreeder remain as before. Even the private hospital of the deceased professor is generally purchased by his successor.

Olshausen is a thin, pale, slightly built man with black hair commencing to turn gray, and he wears on his face that intensely earnest and anxious expression which is an indication of the price he has to pay for being great. As one of his critics told me he owed his position, a really exalted one, not to natural talent, but to indomitable energy and unceasing toil.

He is a splendid lecturer, using only the most classical language, but, unfortunately for strangers, speaks very little French or English. Apropos of this difficulty of languages, I found a growing feeling in favor of having one universal language for the whole world, and as English is already spoken by five hundred millions, it would be most graceful and on the whole easiest for the other nations using some fifty other languages to gradually adopt it. It could be done in a few generations, if English were taught in every school in the world in addition to the mother tongue. The same result is being reached, but much more slowly, by the present method of introducing English words into the French and German languages. Even in that way in the course of a few hundred years there will probably be only one mongrel language for all civilized nations. In the meantime I would strongly recommend all medical men who have sons destined for the medical profession to have them taught to speak English, French and German by nurses or servants from those countries, before they are sent to school. Pardon my digression. I was speaking of the splendid organization of medical teaching in Germany. One of its greatest advantages is the economising of time to the medical visitor. Thus I went there for Gynæcology and Midwifery, and this is how I spent my day. Rising at 6 a.m. and after a bath and putting on clean underclothes, both of which are obligatory, and a light breakfast, which is at you own discretion, I arrived at the Franenclinic or Woman's Hospital at 7 sharp. The porter requires you to sign a book in which you state that you understand the principle of antisepsis and that you have taken a bath, put on clean clothes, not been to any septic case, etc. You then go to a small waiting room where you remove your outer clothing, collar, necktie and braces, and where you are furnished with a clean white coat. The air of this room is saturated with carbolic spray in which you remain until 7.15, at which time you are invited to enter the operating theatre where you find the patient narcotized, the assistants in their places and the operator just about to make his incision. Absolute silence prevails; and no one dares to touch an instrument; if he did it would be discarded.

Martin, who is the best operator, never speaks during an operation; Olshausen, the next best, being slower and more labored, speaks occasionally, while Gusserow, who is much inferior to either of them as an operator, keeps up a lively conversation all the time. Olshausen operates from 7.15 until about 9.45, in which time he generally gets through an extirpation of the uterus or a laparotomy and two fistula or prolapsus operations. He then comes down to the Midwifery clinic where he remains till 11 o'clock. Here he generally has a case of labor under chloroform or serveral cases in different stages, or perhaps a case of pregnancy at the eighth month, a case of ovarian cyst and a case of ascites, in order to practice the students at diagnosing.

The stranger who is so fortunate as to receive an invitation to Martin's private hospital, a walk of eight minutes distant, at once proceeds there, where the operations last from 10.15 to 1.15 or less, as Martin is a much quicker operator, often doing a laparotomy in 11 minutes. He generally has one or two of these and one or two prolapsus operations, of which I shall speak later. After dinner you can go to Wyder's private course on operative gynæcology on the dead subject, which lasts from 2 to 4 and then across the street is Gusserow's clinic at the Charité. In the evening you can have a teacher of German to come to your house. If by chance some day there is no operation at one of these three hospitals the student is seach of Gynæcology can go to Veit's clinic in the Steinmetz Straus, where he can learn, what it is difficult to do at the others, the routine treatment of ordinary diseases, in addition to a fair assortment of operations. Veit is

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