

the secretion had become normal, and thereby not poisonous to the spermatozoa. He also dwelt upon the necessity of removing neoplasms, of correcting displacements, and of operating for lacerations, etc.

DR. JAS. B. HUNTER, during discussion, said that he believed in the necessity for dilatation and incision in such cases.

DR. WILSON of Baltimore also believed in dilatation and incision.

DR. JOHNSTON of Danville, Ky., laid stress on one cause left out by Dr. Sims—viz., the infantile uterus of adults caused by injury to the pelvic sympathetic supply, giving rise to a paralysis analagous to a form of infantile paralysis. Menstruation in such cases is irregular, but the physical formation of the woman is good. All parts, in fact, are healthy but the uterus, which lacked power to form a placenta.

DR. SKENE of Brooklyn found abnormal condition of secretion in cases of infantile uterus. The secretion in some cases resembled that of pneumonic sputa. In answer to Dr. Skene, Dr. Johnston said that there was a difference histologically between the infantile uterus and the senile uterus; to wit, the infantile uterus has more epithelial development than the senile, the secretion is therefore different. The senile uterus is simply an organ composed of pure scar tissue, which becomes more and more dense as age creeps on.

DR. SIMS, in reply, said he was fully impressed with the fact that when death after incision occurred, it was invariably when the operation had been done in the office by an unskilled enthusiast, and the patient allowed to go home afterwards. He thought that gentlemen engaged in a large general practice should be careful, and not be tempted into performing in an off-hand way a procedure so apparently harmless and simple. They may succeed a few times, but sadness and regret will be sure to follow some dire calamity, which must ever be inevitable under such circumstances.

DR. JAS. B. HUNTER read a paper upon *Pregnancy as a Complication in Pelvic Disease*. In this elaborate paper Dr. Hunter enumerated all of the known pelvic complications of