

the indications of the case in hand, that is to say—discriminates. The obstinacy with which these men will hold each to his own favorite line to the exclusion of all others reminds one of the story of the patient in an English insane asylum. His delusion was that he was a dead man and to disprove this, the attending physician one day said to him: "Did you ever hear of a dead man bleeding?" "No." Did you ever see a dead man bleed?" "No." "Then," said the physician, lancing a vein and pointing to the flowing blood, "does not this show you that you are not a dead man?" "By no means, my dear doctor, that simply proves that a dead man can bleed." There are a few, I think, who have the Titan hardihood to oppose the antiseptic spirit of this era in medicine, indeed, it is hard to understand how anyone in the face of overwhelming evidence can be other than a disciple of the gospel of antiseptis; still the impression is forced on one, however earnest he may be in his faith, that it has given rise to much exaggeration in technique. It is not the experience of one of us alone to have wounds heal almost ideally, under conditions that, theoretically, we would be forced to pronounce fatal to aseptic healing; and certainly it is noticeable to the pilgrim to Eastern Medical Meccas, that a more moderate technique is in vogue now than existed a few years back and that while the means proven to best prevent the access of germs to surgeon's wounds are employed, there is less of that fanatic insistence in the use of this method or that. Make a tour of the New York hospitals and we find as good work coming from the German, where the plainest methods are in vogue, as from the Sims or McFarlane operating theatres of the Roosevelt. Dennis, of Bellevue, in his modest way, sends out as well done and successful cases from the wooden walls and deal tables of that old barracks of a building as does McCosh or Briddon from the "marble halls" of their palatial amphitheatre. It is I fancy upon the gynæcologist that we must lay the greatest censure for exaggeration in technique and as an illustration look in any day on Halsted or John Hopkins, operating in the simplest manner possible, with few in

struments, a plain table, whitewashed walls and thoroughly scrubbed floors and then view Kelly in his arena of complications where thoughtful consideration is given to prevent the "nerve strain" of the assistants bent backs and where one hesitates to step for fear of pressing some secret spring that would occasion his being pitched unceremoniously into the Sims or Tradelenburg position. We may make application of this principle of discrimination under the headings of some of the more common features pertaining to the practice of gynæcology and first I am led to touch on physical examinations.

A case coming under my own observation as well as the forcible utterances of Howard Kelly leaves the clear impression that the physical examinations of female patients may be indiscriminately indulged in to their lasting injury. There is, it must be feared, a foundation for the story of the woman who, intuitively, could point out the physicians she might meet by the overpowering influence within her to take the left prone the position on sight. I think we must have all met, in greater or less numbers, victims of this examination habit, and the question arises how far are we, the physicians, responsible for the encouragement of the weakness by insisting on routine manipulations. Obviously, the class of patients requiring the most delicate handling in this respect is the unmarried, and were it not for certain object-lessons that come now to my mind it would seem almost superfluous to appeal for the greatest deliberation in the use of speculum, finger and sound in virginal territory.

#### MEDICAL THERAPEUTICS.

I am free to admit the wide field for discussion that is opened by this simple heading and I do not propose to enter it at more than one or two points. Positivism is here again active and on one side we have the champion whose faith in medicinal agents unaided by the knife is abiding; while on the other stands the hero of many a knifing and curing, who withers opposition by his exhibitions of a long list of cases thus treated. Between this Hector of the one