

Wells' facies. Ovarian facies.

Werthoff's disease. Purpura hemorrhagica.

Westphall's sign. Abolition of the rotulian reflex.

Willan's lupus. A tuberculous form of lupus.

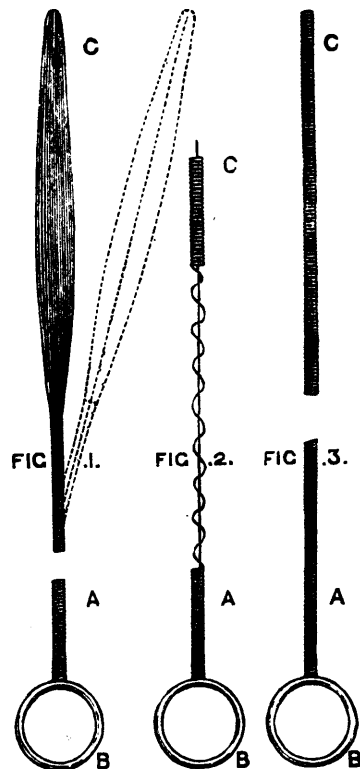
Winckel's disease. Pernicious cyanosis of the new-born infant.—*Le Prog. Méd. N. Y. Med. Abstr.*

A NEW METHOD OF TREATMENT FOR ENDOMETRITIS AND ENDO-CERVICITIS BY MEANS OF MEDICATED BOUGIES.

Whilst the several forms of chronic inflammation included under the above heading are amongst the commonest kinds of uterine disease which come under general hospital treatment, they are also amongst those in which the result of that treatment is the least satisfactory. Nor do they fare any better in private practice, when perhaps greater attention can be paid to individual cases than is possible in the out-patient room of a hospital, so that they often come, and not altogether unjustly, to be classed amongst the often-spoken-of *opprobria medicince*. Various reasons may be given for this. First, there is sometimes a certain sense of inaccessibility surrounding the uterus when the question of local treatment of its interior comes under consideration. Then, again, it is to be feared that there are still a few who regard disease of the female pelvic organs as a something almost apart from general surgery as dominated by the ordinary laws of physiology and pathology, who cannot bring themselves to look upon an inflammation of the lining membrane of the uterus by the same light as that with which they would view, say, an inflammation of the urethra in the male. Above and beyond all this, there is the difficulty, even the impossibility, of obtaining for the organ in question any near approach to that first and most important element in the treatment of inflammation, upon which Hunter insisted and Hilton discoursed so eloquently—physiological rest. In the case of the uterus, the ever-recurring phenomena attendant upon ovulation, the congestion of the pelvic organs accompanying sexual intercourse, and probably, though to a lesser extent, sexual emotion, will render the attainment of even comparative rest a matter of the greatest difficulty. Not, indeed, that the uterus is singular amongst the viscera in this respect, but with it the difficulty is perhaps better exemplified than with any other.

These things being so, any attempt to simplify and render more effectual the treatment of such cases would seem to be justifiable, and, with that end in view, I wish to call attention to a method of applying local remedies to the mucous membrane of the uterus by means of bougies, which I have been using for some little time past in my

out-patient room. The accompanying sketches of the bougies will need but few words of explanation.* (Figs. 1, 2, 3.) The instrument is made of a single piece of fine spiral wire similar to that used for urethral "antrophores." The stem, five inches and a half in length, is stiffened so that it can be bent to any angle required, and so that by it the medicated portion may be guided into the uterus. The medicated portion, an inch and a half in length, contains stiffening only in its first half-inch, and may be coated with any drug that the fancy of the practitioner, or the needs of the case may indicate. The ones which I have myself used have been coated with one of the following: iodo-



form, 20 per cent.; argentic nitrate, 2 per cent.; thallin sulphate, 5 per cent. I am also hoping to get a satisfactory bougie prepared containing pure iodine. Other drugs that will at once suggest themselves as appropriate to the purpose are zinc and cupric sulphates, alum, tannin, and plumbic subacetate. The medicated spiral wire portion possesses the qualities of pliancy and softness, combining with them, however, sufficient stiffness to render its guidance into the body of the uterus a matter of ease in most cases. The bougie is passed up the os through a Fergusson's or bivalve specu-

* For the ordinary run of cases a bougie of somewhat smaller size than that depicted will be found convenient.