

The hours that I have spent with M. Clement Maurice and my assistants studying my technique with the help of the cinematograph, have been of the greatest interest and value.

It is a help to all. The anesthetist is surprised to see himself nervous and anxious at one moment, calm and attentive at another. The nurses who bring the thermo-cautery or who lift away the tumor removed, may see any clumsy movement and correct it.

There seems further no objection to the presence of non-medical spectators at these demonstrations. Members of ambulance societies are in the habit of going to hospital, attending operations, performing dressings, and learning the principles of antiseptic surgery. Such persons may thus acquire knowledge which will be useful in the case of accidents before medical aid can be obtained.

The cinematograph could usefully be added to such a course of training, and first aid students might learn from it the duties they might later be called upon themselves to perform. And is it altogether to be regretted now, when all classes of society follow with such keen interest the progress of surgery, that the non-medical public should have other means of getting information than inaccurate descriptions? We hardly think so, and those who have seen operations as shown by the cinematograph admit that the calmness of the surgeon, the precision of his movements, the perfection of the operative technique, tend to diminish rather than increase the unknown horrors of an operation. The public will also learn this fact, that an operation as performed by one surgeon is a vastly different matter from the same operation by a different surgeon. There has been too great a tendency to believe that with the triumphs of anesthesia and antiseptics, surgery has become all but inoffensive. It is time to protest against this error. The success of an operation depends much more upon the skill of the operator than upon the antiseptic care, which every surgeon ought of course to exercise. The cinematograph, registering the details of an operation with the proper speed and perfect accuracy, will show of what mettle the surgeon is made.

If you wish to publish a new procedure, add to your description several rolls of cinematographic films. Each original procedure can thus be compared with methods already published.

Those of my operations are short, and we have heard it said that the cinematograph "went more quickly than the operation." Turn the instrument yourself and you will see upon how little knowledge this criticism is based. If you turn too slowly the movement of the surgeon and his assistants are manifestly slowed; if you turn too quickly there is a rapidity and haste of movement that at once strikes the eye. The operation is only well reproduced if you turn at the same rate as at the moment of operating. My operations, therefore, last just as long upon the screen as during their actual performance. Most of them are not complete; the toilette of the field of operation, the completion of the sutures offer little interest, and would uselessly add to the difficulty and expense