

ordinary work. The effects of bile and urine poisons are easily recognized and well understood.

The diagnosis of a reflex neurosis is often a matter of great difficulty. Those cases in which pain is a prominent symptom are the least obscure, for although the physiological connection cannot usually be traced, yet experience has led physicians to associate certain painful sensations with lesions more or less distant. Thus pain in the ear frequently arises from a decayed tooth which gives rise to no painful sensations itself. Some forms of headache are associated with ulterior disease. Some painful conditions of the ovaries give rise to a variety of reflex phenomena. But when the reflex disturbance does not affect consciousness originally, and the patient only feels the disturbance, or rather the consequence of the disturbance, of function caused by the reflex neurosis, then the tangle presents many difficulties. It is probable that reflex disturbances are constantly taking place which do not affect consciousness, and it is easy to understand that in such cases the nerves involved are vaso-motor, secretive, tropic, etc.

The treatment of reflex neurosis must consist, in the first instance, of removal of the cause, and when this can be accomplished by surgical procedures, the results often appear miraculous. The cure of a fissure of the anus or a lacerated cervix uteri, while unimportant from a surgical standpoint, is often followed by relief from a most distressing train of reflex symptoms that have lasted for years.

The removal of one or both ovaries for the relief of reflex neurosis, while often followed by recovery, is of more doubtful advantage, the perfect neurosis disturbance which sometimes follows is occasionally persistent, and is probably due to a loss of the internal secretion of the gland.

While surgical procedures are very often successful in giving relief, it will be found that in a large proportion of cases, more or less of the trouble remains and the patient is not restored entirely. Then it becomes necessary to inquire into the general condition of the nervous system and adopt such means as may seem to offer the best prospect of bringing the nervous system to its normal condition. In fact, in every case it will be necessary to bear in mind that a perfectly healthy nervous system will stand a great deal of abuse before it kicks, and that an impaired nervous system will kick when the provocation is very slight.

SOME LEADING EUROPEAN GYNÆCOLOGISTS AND THEIR WORK.

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My last letter described very briefly what I saw in Paris; this letter will speak of some well-known gynæcologists in Florence, Vienna, Prague, Dresden and Berlin.

PERTALOZZA of Florence. Having heard that he was doing a large amount of good work, I left the beaten track and went to Florence to see him. He received me most courteously and invited me to come next morning, which was Tuesday, at seven o'clock to see some operations. He has an immense clinic, being in sole charge of 40 gynæcological and 80 obstetrical beds. Ten of the latter are reserved for isolating infected cases coming from outside. Among his own cases he has had no death from sepsis for several years. The first