tions or suspensio-uteri operations. He said that he now felt justified in coming to certain conclusions concerning these two operations since he had been performing them for over six years, the first Alexander's having been performed on the 23rd January, 1892, and the first ventrofixation on the 18th March, 1890.

Most of the patients had been seen and examined not only by himself but also by many other physicians and students attending his clinics, while the few who had not been seen had been heard from through the physicians who had sent them to him. The results of both operations had on the whole been very satisfactory, with the exception of two cases, in which the ligaments broke, being very fatty, and also partly owing to the method of operating, which he has since improved; in one of these cases he immediately performed ventrofixation with good re sults; the other was a complete failure, having declined further operation. Also in one of the Alexander cases the uterus remained in good position for six months, when it began to fall a little. The failures all occurred among his earlier cases, none having occurred among those operated upon during the last two years. So far no case of hernia had resulted from the operation. The ventrofixations gave even better results than the Alexander's. They were performed for the most part upon women who not only had retroversion with fixation, but the ovaries and tubes were at the same time prolapsed and bound down by more or less dense adhesions. In many of these also there was laceration of the cervix and perineum with cystocele and rectocele. In those cases in which he had performed seven operations at one sitting occupying from an hour and ten minutes to an hour and a half, he had obtained the most gratifying results. These operations were: 1st, rapid dilatation with Goodell's dilator; 2nd, curetting with Martin's curette; 3rd, repair of lacerated cervix by Emmett's method, or amputation by Schroeder's method; 4th, tightening up the relaxed anterior vaginal wall by Stoltz's method; 5th, repair of the perineum by Hegar's method; 6th, removal of diseased tubes and ovaries, and breaking up all adhesions binding uterus down; and 7th, scarifying the anterior surface of the uterus and posterior surface of abdominal wall, and stitching the ute-