

that was attended, at its best, with a mortality of 25 per cent. In 1861, Tyler Smith, speaking from the presidential chair of the Obstetrical Society of London, could utter these pessimistic words, "In the long run, I believe, the results cannot be favorable, either in general or special hospitals." Happily, Tyler Smith's gloomy forecast has not been fulfilled; and by way of illustration and commentary I may mention that at the Chelsea Hospital for Women during the twenty-five years, 1885 to 1910, eight hundred and forty-eight ovariectomies were performed, with forty-seven deaths, giving a mortality of 5.5 per cent.; and if we compare the beginning and the end of this period, we find that in the first five years there were seventy ovariectomies, with nine deaths, or 12.8 per cent.; whilst, in the last five years, there were two hundred and four ovariectomies, with seven deaths, or 3.4 per cent. The results in general hospitals, which at one time were deplorable according to our present standard, are now practically as good as in the special hospitals. Comparing my own cases at the two hospitals with which I am connected, one a general and the other a special hospital, I find at the Prince of Wales' General Hospital, Tottenham, I have had one hundred and forty-eight ovariectomies with five deaths, a mortality of 3.3 per cent.; whilst at the Chelsea Hospital for Women I have had one hundred and six ovariectomies with three deaths, or 2.8 per cent. Naturally, the later results are rather better than the earlier ones; the figures for the last ten years, from July, 1902, to July, 1912, for the two hospitals combined, work out at two hundred and twenty-three cases with five deaths, or 2.2 per cent.

It would take too long to enumerate the successive steps by which the mortality of ovariectomy was progressively lowered; nor can I here pay the tribute of recognition and praise to the brave and brilliant workers who, through good and evil report, persevered in perfecting the operation; it must suffice to recall that the three great factors that revolutionized the results of ovariectomy and laid the foundations of modern abdominal surgery, were, first, the discovery of chloroform anesthesia by Simpson; secondly, the perfection of *technique*, in which Spencer Wells played such a notable part; and thirdly, the introduction, by the genius of Pasteur and Lister, of antisepsis and asepsis.

It is difficult for us to imagine the performance of an abdominal operation without anesthesia; and when thinking of the pre-anesthetic days, probably our first impulse is to thank heaven that we are not called upon to operate under such conditions. It is, therefore, a matter of great interest that we have preserved for us