The history of the patient, physical signs, Wasserman reaction and response to mercury and salvarsan leave little doubt as to the underlying cause of the patient's condition being syphilis. It is therefore important to bear in mind that in cases presenting a clinical picture of splenic anæmia or Banti's disease, syphilis may be the underlying factor, and should, therefore, always be considered in the differential diagnosis.

THE VALUE OF RADIUM IN MALIGNANT GYNAECOLOGICAL CONDITIONS.

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THE employment of radium in therapeutics dates from the latter part of the year 1901 when it was used by Dr. Danlos, physician to the Hospital of St. Louis, Paris, in the treatment of cutaneous tuberculosis. Shortly after this Foveau de Courmelles demonstrated its analgesic properties, applying it to external and deep cancer, and in 1904 he published some cases of uterine cancer in which improvement had resulted from this method of treatment. Subsequently successful results in various gynæcological conditions were reported by Oudin and Verchere, Dominici, Cheron, Rubens-Duval, Wickham and Lacapere, Fabre and Bender. In the United States it was first used in 1905 by Abbé for two cases of cancer of the cervix.

Amongst the gynæcological conditions in which successful results have been reported by different writers are cancer of the uterus, fibroid tumors of the uterus, fibroid tumors associated with metrorrhagia, or with metritis and blenorrhagic urethritis, cancer of the vagina, metritis, and more especially hæmorrhagic metritis, acute and chronic adnexitis, chronic pelvic cellulitis, chronic salpingitis, salpingo-ovaritis, cancer of the ovary, chronic urethritis, inflammation of Bartholin's glands, and pruritus of the vulva. It has also been recommended for irregularities of menstruation, including membranous dysmenorrhoea, in which Jacobs, reports good results. It will thus be seen that radium now has a very extensive field of application in the domain of gynaecology.

De Courmelles₂ points out that in regard to the technique employed in gynæcological conditions it is indispensable—whatever form of apparatus is selected—that the A rays and the soft fraction of the B rays should be arrested by means of a metallic screen of suitable thickness, and that the secondary rays emitted by the metallic screen itself should be arrested by an external sheath of India-rubber, gutta-percha