

the kidneys, cardiac disease, diseases of the liver, etc., and here operative measures will certainly not yield any beneficial result though medicinal treatment may. In these papers upon uterine hæmorrhages you very rarely see the subject treated at all except from a purely local standpoint and I think herein is the mistake. As regards the treatment of the condition that of course depends very largely upon the cause. Many of the cases of miscarriage and the hæmorrhage of puberty will be benefited more by tonics, change of air and change of general surroundings than by any other method, and in these last local treatment should be discouraged. There should be no school or gymnastics; a sea voyage is one of the best measures.

As regards the use of adrenalin I have used it a few times with marked benefit. In several cases where there is atony of the uterus sometimes the actual curette will not even temporarily check the hæmorrhage and in such cases I pack the uterine cavity with plain sterilized gauze saturated in a solution of adrenalin. Most of us have tried the perchloride of iron. In many cases that will work where others fail. As regards the uterine injections of hot water, Milne Murray advocates very small intrauterine douches for the immediate control of hæmorrhage in preference to large ones which, while they contract at first, bring on relaxation later. With regard to superheated steam the reports show that it is well worth a trial in certain cases.

DR. SMITH: A great many of the cases which come to us have this as the principal symptom, and very often it is the only symptom of a general condition. As Dr. Lockhart has remarked most of these hæmorrhages from young girls are due to poor nutrition and they rapidly respond to general treatment, iron, strychnin, phosphoric acid and sunlight and fresh air with a good plain diet. With regard to the surgical treatment we still have a lot to learn. In many of my cases where I have removed nearly all of the ovaries and both tubes hæmorrhage has still persisted. It is interesting, too, to note that a small cancer nodule may escape the ordinary curetings. I had a case where the severe hæmorrhages came on some two years after the menopause; curetings did not improve matters and on removing the uterus an angry looking ulcer was found which was proved definitely to be cancer by the pathologists. Curetting, however, is of great value among the surgical proceedings and has given great satisfaction if done very thoroughly and followed by the application of an iodide and carbolic acid and well packed. One should find no difficulty in stopping these hæmorrhages either by constitutional or local treatment. Subinvolution is a great cause of hæmorrhage. For this purpose the galvanic current is of great value. I tried adrenalin only once, injecting it into