and dysuria and compression of the rectum by the retroverted fundus. The patient experiences a sensation of compression which is difficult to distinguish from that produced by hyprostatic congestion of the fundus. Habitual constipation frequently produces a painful proctitis, with or without desquamation of mucous membrane. This is present when the inflammatory exudation has produced adhesions between the posterior surface of the uterus and the peritoneum of the cul-de-sac. Where there are no rectal adhesions, there may still exist a persistent spasm of the sphincter ani causing tenesmus, which is almost pathognomonic of chronic retroversion.

The adnexa are the seat of painful sensations, also the intestine, where it comes in contact with these parts, for the spasms spread to the utero-ovarian ligaments, to the broad ligaments and muscular structures which become ridged and fixed in an abnormal position.

D.—Pain in Uterine Prolapse.

Many of the varieties that we have described in connection with retrodeviation may be found in this condition. How can it be otherwise since retrodeviation is one of the essential stages of prolapse? the uterus cannot descend below a certain level without turning backwards and placing itself in the axis of the outlet of the pelvis, that is the axis of the vagina.

Lumbo-sacral pain is present, caused by the stretching of the utero-lumbar and sacral ligaments. There is also a painful tension towards the sides of the pelvis due to tension upon the broad ligaments. The painful sensations extend to the epigastrium and lower ribs. The general prolapse of the pelvic contents produce ptosis of the abdominal viscera. The relaxation of the abdominal walls, frequent in these cases, aggravate these symptoms. Vesical tenesmus is more frequent and severe than in retrodeviation. We may also mention polyuria. The painful compression of the rectum and tenesmus of the bowel are absent. We may say that in the two conditions, prolapses and retrodeviation, the difference is the following as to the pain: in the former predominance of lumbar pain and vesical troubles, and in the latter predominance of sacral pain and rectal trouble.

E.—Pain in Tumors of the Uterus-Cysts.

This is a rare condition, if we are to understand by this tumors of a considerable size. The small mucus cysts of the cervix, which have their origin in the glands and rarely exceed the size of a filbert, produce a vague pain difficult to define, similar to that of chronic metritis.