there will come away a profuse watery discharge, from four to eight ounces or more, in proportion to the condition of the uterine vessels.

His method of introduction is as follows: Place the patient in Sims' position, then introduce Sims' speculum. After saturating the cotton thoroughly, pull back the perineum and push the cotton against the cervix, and let the cervix rest on the anterior part of the cotton. Hold the cotton in that position and remove the speculum. The anterior portion would then lie in the direction of the pubic bone, and thus acts as a pessary, beause the perineum springing up against the cotton, keeps it in place. The action of the boro-glyceride is to prevent any kind of ferment or change. It has a good effect in catarrhal conditions and does not interfere at all with the action of glycerine and alum in producing the watery discharge, He leaves it in for twenty-four to seventy-two hours; then washes out the coagulated mixture, and in three or four days makes a second application. If there is much dragging sensation, he tells the patient to wear it for two or three days.

The watery discharge that comes from the mucous membrane not only of the vagina, but of the uterus, forces a rapid circulation through the pelvic vessels. It acts in the manner of hot poultice, by getting up an active circulation through the tissues, thus bringing fresh and healthy blood to the tissues; in that way it helps to eliminate diseases. He says he can take a case of sub-involution of two or three months standing, with the dragging sensation and more or less discharge, and in from three to six weeks he will reduce the uterus to its normal size, using nothing else but this cotton. I can heartily endorse this treatment, as it has enabled me to entirely discard pessaries.

The exosmotic action of glycerine cannot be too highly appreciated in cases of passive engorgement.

Dr. Henry Rutherford, in the *British Medical Journal*, reports a number of cases of fibro-myomata, in which he obtained marked diminution and in some cases complete arrest of hemorrhage by the use of fifteen drops thrice daily of tincture of hydrastis canadensis.

In the *Chicago Medical Times* Dr. A. L. Clark has an article on the treatment of painful menstruation by viburnum. I notice, however, that it required from five to six months to obtain relief from pain. I would suggest to him, fine wire faradism.

In the *synopsis*, Dr. Joseph L. Bauer reports a case of retroflection of the uterus completely cured by Brandt's method of massage, which consists in introducing the right index finger into the vagina, so as to reach and elevate the uterus, the left hand on the abdomen compressing the uterus against the right index finger, the organ thus being alternately elevated and compressed during five minutes' time and repeated every other day. It is but right to say that glycerine and tannin tampons were used at the time.

From a discussion going on in some of the journals it would appear as if cutting the cervix for stenosis may again come into fashion; but I think that it cannot compare in safety and permanence of results with Goodell's rapid dilatation.

Laparotomists who use drainage tubes are beginning to realize that they cannot drain against gravity. They are, therefore, either draining into the vagina through Douglas cul-de-sac, or when they drain through the abdominal wall they keep the patient on her side.

Doleris, in Paris, and Martin, in Berlin, are treating diseases of the uterus entirely by plastic operations on the anterior and posterior vaginal walls and perineum.

Loss of life from wild animals and snake bites is said to have been unusually great during the past year in India. In 1887, no less than 1,203 persons so perished, the number for 1886 having been 1,109.