

around the centre of them, leaving the two ends about 8 inches long. When you have seventy of these tampons made dip them one by one into a pint of water containing 7 grains of sublimate, squeeze them out and hang them by the threads in a warm place free from dust to dry. Each tampon will then have one-tenth of a grain of bichloride. By coloring the liquid with aniline dye you will exactly know whether the tampons have been sublimated or not. These tampons are then packed rather firmly in gem jars or wide mouthed stoppered bottles and hot boroglyceride (10 parts of boracic acid diluted in 90 parts of glycerine) is poured over them until they are saturated. By applying one of these to the cervix 2 or 3 times a week and leaving it in for 48 hours congestion and tenderness of the pelvic organs may be immensely relieved in a month or six weeks. At the end of 48 hours the patient may withdraw it by the string left hanging from the vagina, and she may then give herself a vaginal douche two or three times a day before the next application. This matter of hot vaginal injections or douchings as it is called requires special directions. You tell a woman to syringe herself with hot water and what does she generally do? She will probably use a little two-dram glass ear syringe and perhaps refill it a few times, making in all about an ounce. I need hardly say that this is useless. To be effective douching must be performed as follows: The woman lies on a sofa or edge of the bed with a piece of oilcloth under her leading into a pail. The nozzle of the syringe is introduced backwards to the posterior vaginal fornix, and at least half a gallon of water as hot as the hand will bear is allowed to flow with some force. Care must be taken to plug up the centre hole of the nozzle as severe pain is sometimes caused by injecting water into the uterus. Unless specially instructed, women will generally take an injection while squatting over a basin; this method is inefficient, because the water runs out alongside of the syringe as fast as it

goes in without touching the uterus at all. As long as there is any acute inflammation, as evidenced by tenderness and heat, on digital examination and by the redness on passing the speculum, the cervix is not in a fit condition to be sewed. For this reason I have often been compelled to treat patients sent me from the country for three or four weeks before I could safely venture to sew up the lacerated cervix.

In cases of leucorrhœa not depending on anæmia or not improving under tonic iron treatment, the following I have found to rarely fail me:

Zinci sulph.

Plumbi acet., āā ʒj.

Mix and divide into four powders. Each powder to make one quart of injection. Use a teacupful as a vaginal injection three times a day.

In married women discharges of all kinds, not excepting gónorrhœa, will be speedily stopped by the application of a boroglyceride tampon every day or two. Even many cases in which there is a discharge of pus from the uterus are soon relieved by their use. In single women we had better depend upon injections.

Among other things which you may readily recognize by means of bimanual examination are the different abnormal positions and forms of the uterus. Only a few of these are of any importance; thus: the uterus may be very high up, to one side or the other side, or it may be anteverted without producing any bad symptoms. It is only when it is retroverted, prolapsed or sharply bent on itself that it requires treatment. All these conditions are due to relaxation of the muscular fibres which should hold it up with very often increased weight to the organ itself; our first duty, therefore, is to diminish its weight by boroglyceride tampons, removing obstruction to its circulation, and our next to tone the relaxed organ up with good food, good air and strychnine. But the most effective treatment where there are no adhesions is the coarse wire faradism with