

it was quite unnecessary; but I had no curette with me at the time, and the woman had lost a very great quantity of blood. Most certainly, when used, plugging *was* effectual; it completely controlled the hemorrhage, and after the plug was removed the os was found to be sufficiently dilated.

"The advantages of plugging, to my mind, are: 1. That it is not a safe operation unless done with great cleanliness, and aseptic materials, the great pressure around the cervix causing ready absorption of septic material. 2. If it is to be effectual, it is a very painful operation, necessitating an anesthetic. 3. It is a temporary, not a final, measure, requiring to be repeated perhaps indefinitely.

"To shortly enumerate the routine of the operation itself which should be followed: A vaginal douche should always be given, the vulva being first cleansed with soap and water. The bladder and rectum should be always emptied before plugging. A speculum is really never needed, two fingers of one hand pressing down the perineum being much better, a speculum giving rise to difficulty in withdrawal and loosening of the plug. If possible, plug round the cervix with gauze, but for the vagina I would strongly recommend small balls of absorbent wool wrung out in an antiseptic, preferably lysol; the kit¹ of lint soaked in oil and fastened together by strings, recommended by some authors—a wonderful and fearsome device—should be eschewed.

"The plug should always be removed in twelve hours at the longest, and the vagina douched again after removal, care being taken to see that no plug is left behind in the fornices. For this reason I advise a single piece of gauze round the cervix. In such cases the use of the catheter will seldom be required owing to the preceding loss of blood. If plugging be done at all, it should be thoroughly done; it is not easy to err on the score of tightness, short of actual violence. The necessarily large consumption of cotton wool should not be feared, remembering that a plug to be of any use at all must not only fill but distend the vagina and press up the uterus."

The author then recommends boldly emptying the uterus by the finger or by the curette as soon as the cervix is sufficiently dilated to do so. This he believes to be the correct treatment in all cases, and he would even recommend it to be done in all cases where hemorrhage, even though slight, continues, for here we may be certain that the abortion is incomplete.

The author submits the following conclusions: 1. Plugging in early abortion is rarely necessary, and when employed should be used only with the definite hope of dilating the cervix. 2. Ergot and other drugs should not be used unless the case is complete, and they will then be unnecessary. 3. In about five