

until the happy release, even in these hopeless cases, we can do much for the comfort of all concerned. By curetting away all the necrosed tissue with a sharp curette, and cauterizing the remaining tissues with the thermo-cautery, it is possible for a patient who is in a hopeless condition as far as any curative operation is concerned, to live for several years almost without knowing that she has the disease, and for her eventually to die a painless death from cancer of the liver or other internal organs. Indeed, I feel sure that the heat of the actual cautery is the most powerful means we possess of arresting the disease. This is proven by the much better ultimate results obtained by Dr. Byrne, of Brooklyn, than by any one else. He amputates the cancerous cervix with the galvano-cautery knife, and he has many cases living after from five to ten years. Many of my own cases have been curetted two and three times at intervals of from three to six months, so that I know of several who were still alive nearly two years after the disease had reached the hopeless stage. So much for the cases which are too far advanced for hysterectomy.

Now the question comes up: "Which cases are to be classed as hopeless, and which are we justified in performing hysterectomy on?" It is precisely on this point that my opinion has undergone a decided change. Up till my visit to Brussels four years ago, I was doing vaginal hysterectomy for all those cases in which the uterus was at all movable even if the broad ligament on one or both sides was rather thicker than usual. But I had noticed that while the death rate of the operation was slight, the disease advanced much more rapidly than it did in the much worse cases which were only curetted from time to time. So that at the end of two years from the operation there was not one woman living, and most of them died within a year. On discussing this point with Jacobs, of Brussels, he told me that his experience, which was far more extensive than mine, was exactly similar. So much so, indeed, was he impressed with this common observation that he told me he had given up removing the uterus for cancer altogether! When I returned home I adopted a new course; I ceased removing the uterus whenever the broad ligaments were infiltrated, even if the uterus were