

GYNECOLOGY.

ON THE TREATMENT OF UTERINE SUBINVOLUTION.

Dr. Milne's paper (*Edinburgh Med. Journ.*) has for its object to show the importance of subinvolution in producing various forms of uterine suffering, and to point out certain causes producing it which have not been generally recognised. Metritis, frequent abortion, and rising too soon after labour are generally recognised as frequently giving rise to this condition. Another, to which Dr. Milne attaches much importance, is the neglect of lactation. The neglect of lactation seems to prevent uterine contractions after labour and favours a persistent hyperæmia, which hinders the degenerative changes which should occur, and impedes absorption. Another cause is the too early cessation of the lochia, which not unfrequently occurs. A third is too frequent child-bearing, impregnation occurring before the involution following the former pregnancy has had time to be completed. No remedy seems to be so powerful in promoting involution as the ergot of rye. The author advises a course of the drug in all cases in which lactation is impossible, as also subinvolution has been found to exist. Locally painting the uterine cavity with tincture of iodine at intervals is of great value.

AMPUTATION OF THE CERVIX UTERI.

Two cases of this operation are given in the *Buffalo Medical and Surgical Journal*, by Dr. Van Derveer, in one of which the patient (who had up to that time been sterile) had since borne two children. The other woman was unmarried. In her case the operation was performed on account of elongation of the cervix to such an extent that the organ protruded when she stood up, and the hypertrophied cervix so interfered with micturition that it had to be pushed up before the urine could be passed. Dr. Van Derveer recommends to pull the uterus down as much as possible by a silver wire passed round it, and then to remove the organ with scissors, making the cut obliquely, so that the surfaces of mucous membrane can be brought together. The wire acts as a tourniquet as well as a handle.

A JOURNEY UNDER CHLOROFORM.

A novel, very interesting, and useful application of chloroform has just been made by Dr. Squarey, of the Soho Hospital. A lady had been subjected to an examination under chloroform on Tuesday last. The husband of the patient wished to move her as soon as possible to her home at Norwood, but in her then condition of pain and exhaustion a journey was out of the question. The advisability of her return being strongly urged by her friends, it was proposed to perform the journey under chloroform, and this was actually accomplished on Wednesday. The patient was anaesthetised on her bed in George-street, Hanover-square, having no knowledge of her impending journey. She was then carried downstairs and placed in an invalid carriage, driven to her home at Norwood, and taken out and carried upstairs to her own bed without at any time actually recognising that she was on her way home. The journey occupied an hour and a half, and the patient was under chloroform about two hours. —*Lancet*.

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