

PROGRESS OF GYNÆCOLOGY.

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GYNÆCOLOGY AT THE EDINBURGH MEETING OF THE BRITISH MEDICAL ASSOCIATION.

On the way to the meeting I had the pleasure of hearing an address by Martin, of Berlin, on the "Progress of Ovarotomy" in the last twenty years. It was a remarkable paper by a remarkable man. He has adopted the vaginal route to a great extent, and he closed his paper by giving the results of 131 vaginal laparotomies for diseased ovaries and tubes, and for retroversion, ovarian cyst and small fibroids, etc. Out of these 131 cases he lost 2. Since my return from Berlin I have performed a number of these operations at the Samaritan, Western, and at my private hospital with most gratifying results. These will be reported in full later on, but in the meantime it is of interest to note that all the patients operated by the vaginal route made a much quicker recovery than those by the abdomen. Although they included pus tubes, tubal pregnancies, retroversion with fixation cystic ovaries, and closed tubes which were opened, yet not one of the patients died. Another striking advantage was the absence of the abdominal scar and the pain from the incision, which these patients generally suffer from very acutely, was entirely absent. In fact most of these patients did not require any anodyne whatever. During the discussion at the recent meeting of the British Gynæcological Society, a gentleman reported a number of cases by the vaginal with bad results and the other speakers all pointed out with great stress that the vaginal route is not suitable for large tumors of any kind whether fibroids or collections of pus, because it is almost impossible to deal with the adhesions which are so often present in these cases. In properly selected cases I feel sure that the vaginal route has immense advantages over the abdominal one.

One of the most interesting figures at the meeting was Doyen, of Paris, who showed two new instruments; one for automatically holding