creased. "I know of no other cases" he said "which are so amenable to treatment and improve so much. With rest and the use of hot water we will after a few days or a week or two find the great mass of inflammatory deposit gone and are then able to make out the outlines of the diseased uterus and tubes which we now find moveable and we can proceed to operate under more favorable circumstances."

There is no doubt, however, that operative interference has been overdone by some gynecologists of the last few years. I agree with Dr. Horatio R. Bigelow when he says in his address before the Ninth International Congress, that vastly more appendages are removed than pathological changes require. At a late meeting of the Medical Society I stated that the Fallopian tubes could in many cases be entered by the sound, and in support of my statement I quoted Dr. Wallace of Liverpool. Dr. Kelly of Philadelpha has advocated the catheterization of the tubes for the treatment of pyosalpnx. This treatment may yet be the means of avoiding a serious and dangerous operation. That the removal of the ovaries and tubes for pain only is no longer justifiable is now pretty generally admitted. For the pain can be removed by other means and the removal of the appendages does not always cure the pain. I have at present under treatment three patients from whom the ovaries had been removed for pain; that this pain was neuralgic was proved by the fact that after having risked their lives and spent several weeks or months in hospital they were discharged unrelieved. In two of them a few applications of fine wire faradism completely cured their most distressing symptoms; in the other a course of phosphate of iron and strychnine has given permanent relief. But apart from these cases I have had a considerable number who had been urged to have their ovaries removed for relief of pain and who have also been cured by the treatment I have mentioned. I be-

lieve that not only the ovaries but the broad ligaments are frequently the seat of varicocele the result either of relaxation of the walls of the veins or to some impediment to the return of the blood higher up. Young men suffer often from the same symptms and can be promptly cured by rest and a tonic treatment. Supposing that these young men consulted Dr. Mary Brown, an ambitious female doctor who was anxious to get up a reputation as an operative surgeon, she would no doubt urge the young men to have the testicles removed, pleading that the testicles would only be a source of trouble and expense to them as long as they lived. The latter argument might be quite true, but would the young men consent? I doubt it. But the fact is that in order to get up a reputation as a gynecologist it seems necessary to cut open some one for something, or as Tait puts it, they say "Here's something; let's have an operation." Mr. Tait recently said that the ovaries have no more to do with sexual feeling than the front teeth. This I think is not correct. I have inquired from a great many women as to the effect of castration on them and they have all told me that the removal has completely changed the tenor of their lives. They are not able to exactly define the alteration in feeling but they feel as though they were different from other people and that other people are shunning them. Others say that they no longer care to mix in society but only wish to get away by themselves. One in particular told me frankly that before the removal of the ovaries "she was never happy unless she had some men around her, but that since then she did not want to see the sight of one." Apropos of the effect of gynecological operations on the mind Dr. T. Gaillard Thomas, of New York, read a paper on "Acute Mania and Melancholia or Hypochondrasis as Sequelæ of Gynecological Operations." He reported six of his own cases and referred to twenty-two others in which this accident happened. From