physician relying upon it into a false sense of security. Allowing the patient to sit up in bed, as recommended by Dr. Smith, he thought dangerous.

Dr. J. Alex. Hutchison advocated the use of permanganate of potash, and referred to three cases of septic fever in which its use had been followed by good results.

Dr. D. F. Gurd said he had had a thousand cases of midwifery and had never given an intra-uterine douche. Among these there had only been four cases of fever, in two of these nervous influences and a morbid fear, for some months previous to parturition, had been a factor in the cause (all recovered). As a rule he did not give vaginal injections, but trusted to quinine and stimulants. He was most careful about the patient's clothing and bedding being clean.

Dr. F. Buller said that though now an ophthalmic surgeon he had had at one time a large experience in midwifery practice, and that he had never used all the precautions spoken of by Dr. Evans, and he did not have many mishaps. He thought that 99 per cent. of women would get well if left strictly alone. That non-interference does not refer alone to midwifery, but to general surgical work, was borne out by his experience in a military hospital. He had observed that it was the practice of the surgeons to put a probe into every wound, with the result that there were numerous cases of erysipelas and pyæmia. Noting these facts he never interfered unnecessarily with the wounds under his care, and he never had a case of erysipelas or pyæmia.

Dr. Evans, in replying, said that it was not his practice to disinfect the vagina unless there was evidence of leucorrhœa or gonorrhœa. He allowed his patients to sit up when there was good, firm uterine contraction, and he had never yet seen any trouble result. In irrigation he did not think that the kind of solution made much difference, the chief points being the use of hot water and plenty of it. He agreed that non-interference was best in normal cases, but where there was local disease present it must receive local treatment.

## Sarcoma of the Uterus.

Dr. J. A. MACPHAIL exhibited the specimen and spoke of the rarity of the disease.

Dr. Lapthorn Smith said that he had removed this sarcomatous uterus from a woman 40 years of age, the mother of twelve children at term and two miscarriages. The last child was one and a half years of age. She had been suffering from menorrhagia all last summer until she had consulted her family physician, who discovered a polypus projecting from the os uteri, and the speaker was sent for to remove it.