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Original Communications.

NEW YORK LETTER.

(By our Special Correspondent.)

DEAR RECORD :

As it is some time since your readers have had a letter from New York I shall take this opportunity of fulfilling my promise to send you a few lines. I trust however they will make allowance for the fact that as the Xmas holidays approach the work at the hospitals and clinics falls off a good deal. In fact things are rather quiet in medical circles. Owing, however, to the kindness of some of the writer's friends many interesting operations were arranged so that he might have an opportunity of seeing their methods of doing work. On arriving here, I proceeded at once to the New York State Women's Hospital, Cor. of 49th street and Lexington Avenue, where I found Dr. W. C. McGannon, of Brockville, second in command, while another young Canadian from Toronto was third in charge. Dr. McGannon won this position by competitive examination, and I was informed by several of the leading members of the attending staff that he was a great favorite with them all, one even saying to the writer that they wished he would send some more Canadians like him to fill the next vacan-

cies on the house staff. Dr. McGannon at once placed my name on the list of guests to be invited to all the operations, and also told me where I could spend the rest of my time to best advantage. Space will not permit me to record at length all the operations I witnessed at this hospital during my two weeks' stay. Among others the following may be interesting :

An operation by Dr. Thomas Addis Emmett, for shortening the anterior and posterior vaginal wall in a case of prolapsus with cystocle and rectocle. For the latter purpose he denuded with right and left hand scissors a rather large triangular surface, the apex of which was the tip of the rectocele, and the base extending across the posterior commissure to the base of the nymphæ. The apex of this triangle was then drawn down until it nearly touched the centre of the base, thus making two smaller triangles. The sides of these were then stitshed together, care being taken to pass the needle deeply so as to include the ends of the separated pelvic fascia and levator ani muscles. One or two crown sutures were then passed so as to bring the opposite sides of the vulva together. I also saw this same operation performed by Dr. Hanks and one or two others. Dr. Hanks is one of the most charming professors connected with either