THE IMPORTANCE OF EXAMINATION OF THE GENITAL TRACT DIRECTLY AFTER LABOR.

In a short paper some time since I endeavored to point out the advantages of flushing the uterus with hot water directly after labor, and my reasons for adopting such a proceeding.

I now wish to point out the importance of making a close exploration of the genital tract for any injury that may occur (more especially in primiparæ) during the process of parturition, by visual and tactile examination. The cervix uteri is frequently torn, the edges of the os lacerated, and the vaginal walls injured, *leaving the perineum intact*; so the conclusion is oftentimes come to that all is well, while considerable mischief may have been done unobserved.

By the hot water flushing we get rid of several sources of danger, and if a thorough examination is then made for vaginal and cervical injuries it will be comparatively an easy matter to draw together the torn surfaces in severe cases, and cauterize in minor ones with strong carbolic, thus leaving the parts concerned in a better condition for repair, and less liability to absorb. It will be obvious that at no other time subsequent to labor have we a better opportunity. No objections will be raised by the patient, and on the old proverb principle that "a stitch in time saves nine," may save a patient from septic absorption, with all its train of misery. The comfort to the practitioner's mind (when such lesions are found), by treating them *at once*, is no small recommendation to the adoption of this proceeding, and the no less pleasurable disappointment of finding that none exist (*which could not be determined without examination*), will also commend itself.

As a general rule the uterus is not washed out after labor, and no examination made except of the perineum.

The consequence is that in some cases when septic symptoms develop *the true cause is never known;* whether depending on a piece of membrane left to decompose *in utero* (which should have been removed at the time of labor), or a lacerated cervix never discovered, or some tear in vaginal surface, allowed for days, perhaps, subsequent to labor, to absorb the morbid products of conception, and so by permeating the patient's system bid defiance to the best directed efforts of the practitioner. I may also allude to the danger in cases where no examination has been made, and septic symptoms develop, of syringing with corrosive sublimate solution the abraded or torn surface which, in the first instance, took up septic water, being also capable (as proved by some cases lately published of severe burn) of absorbing the corrosive solution, and so contributing, if not actually occasioning, the patient's death.—Alexander Duke, F.R.C.S.I., in *Hosp. Gaz.*

ALCOHOL AND LONGEVITY.—Dr. Ridge, in writing to the *Lancet* on this subject, deals with a matter of great public interest and importance, but in a way which leaves something to be desired. Underlying the whole of his argument from the published figures of the United Kingdom Temperance and General Provident Institution is the assumption that the two sections into which the members of that society are divided, *i.e.*, the Temperance Section and the General Section are substantially on the same footing in reference to such matters as bear upon longevity save in the one particular of the use or renunciation of alcohol. On this assumption the figures are both striking and significant, for they show that over a long period of years the mortality rate in the Temperance Section has been consistently and markedly lighter than in the General Section, and therefore, to use Dr. Ridge's words, "the use of alcoholic liquors produces degeneration of the tissues and shortens life." But is the assumption of parity between the two sections in all other material respects than the use of alcohol a sound one? We believe not. It has been frequently stated, and never to our knowledge denied, that those members of the society who, having entered in the Temperance Section, cease to practice total abstinence, are thereupon passed from the Temperance Section into the General Section. Thus the ranks of the latter are constantly receiving recruits from the former, and a moment's reflection will show that these recruits must be of an undesirable class. Not only are they brought in without medical examination, but even by a process of selection which obviously works against the office. In many cases failing health is the cause of recourse to alcohol; and a sensible proportion probably of these transferred risks are cases of persons in this plight. If so, it is manifest that the process must entirely destroy the comparative value of the resulting mortality figures. The mortality of the Temperance Section is relieved by the withdrawal of more or less moribund members, and the mortality of the General Section is aggravated by the accession of the same individuals. To what extent this effects the result it is obviously impossible to say; but as most of the Life Assurance offices which publish their mortality are able to show as the result of medical selection a sensible reduction in the number of actual claims as against expected claims on a general business, the General Section of the United Kingdom Society would seem to be below par, and we strongly suspect that the explanation is what we have suggested. But the point is one that stands greatly in need of elucidation, and if those who have command of the very