

thesia very largely, preceded by an injection of scopolamin two hours previous to the operation. Goldmann has utilized the X-ray very largely in connection with his surgical work, and, among other things, he demonstrated the relationship of the trachea to the goitre, and stated that he has found it of service to observe by this means in what manner the trachea is diverted from the middle line. Occasionally, as the result of such investigations, he has found it better to remove the smaller side of the goitre instead of the larger portion of the growth. Here, as elsewhere in Germany, one found that Freyer's method of performing supra-pubic prostatectomy was in favor; in fact, nowhere did the German surgeons seem to approve of the perineal route, which has recently been abandoned by them for what they invariably call "Freyer's Operation."

In Professor Krönig's clinic in Freiburg, one found an enthusiast in the employment of spinal anesthesia. Stovain is employed for the purpose, and the professor has already operated upon over one thousand cases under this form of anesthesia. He always uses a preliminary injection of scopolamin an hour and a half, and another one hour, before the operation. The apparatus which he used was so constructed that in each case the pressure of the cerebro-spinal fluid was measured at the time of the injection. The writer saw him perform what might be called "A Fantastic Operation."

This was a case of a patient who suffered from dysmenorrhea of unknown origin. She was placed under the anesthetic and by means of the transverse incision above the pubes, the pelvic viscera were exposed. Both ovaries were removed with a segment of the tubes by a V-shaped incision into the broad ligament. A piece of each excised ovary was removed for microscopic examination. The ovaries were then placed in normal saline at the body temperature in a glass jar, and exposed in this for ten minutes to the influence of the X-ray. They were then brought back, a second piece removed for microscopic examination, and then each ovary was stitched into a pocket formed between the round ligament and the remaining part of the broad ligament. The wound was then closed.

The professor stated that the menopause was not induced by the operation. He also informed me that it was yet too early to state what results would be obtained by the surgical procedure, as it was too soon to come to a conclusion.

The lighting of the operating-room in Professor Krönig's clinic was a feature of some importance. It consisted of an arc lamp erected in the south wall of the theatre, the rays of which passed through ground glass, and impinged upon a mirror which was suspended from the roof of the theatre. The mirror was so poised that it could be turned at the required