

reason that the uterine cavity cannot, at least should not, be explored until the vagina has previously been thoroughly cleansed. The first thing then to do is to wash out the vagina with a one to two thousand corrosive sublimate or a two per cent. carbolic acid solution. After this preliminary is accomplished, one is prepared, to differentiate between vagina and uterus, and in the following simple manner; take a clean new No. 7 or 8 gum bougie and introduce into the uterine cavity, turn it about the cavity, then withdraw. If there be no putrid smell, and the secretion adherent to the bougie smells normal or healthy, then it is quite safe to infer that there is no infection from that source; should it be otherwise, a thorough irrigation of the uterine cavity will become necessary, say three times in the twenty-four hours, and every time sufficient fluid must be used till the rinsings become clear and perfectly odorless. Should the operator decide to use corrosive sublimate, which is the best, he should always follow the sublimate irrigation with simply pure warm water, previously boiled; this will displace and wash out the sublimate solution that might be retained and so prevent absorption of mercuric chloride and mercurial poisoning. In the absence of evidence pointing to the uterine cavity it becomes simply necessary to douche the vagina with either of the above solutions, as often as may be necessary to keep the parts disinfected and cleansed.

Physicians who have had even a limited experience in the treatment of this complicated affection, will agree with me how awfully disappointing the usually employed remedies are in affording relief from pain, not to say, how utterly ineffectual the known treatment has proved itself in aborting or abridging the disease, by this I mean, to keep under control the inflammatory process, and to prevent those structures which are inflamed from eventuating into suppuration and abscess.

We will of course all agree, on the importance of a nutritious and easily digested

diet as an important factor in furnishing vitality towards assisting the elimination of toxic elements and fortifying the system against their depressing influence; alcoholic stimulants are very beneficial, and it is a good plan to give the food at regular intervals of four hours, for the simple reason that in the great majority of cases alimentation, thus administered, agrees with the physiology of digestion, and the interval affords an opportunity for the administration of such medicines as may be deemed useful.

Quinine in capsules, two or three grains at one dose, will always be of benefit if the digestion is not compromised by its use. Morphine to relieve pain, occasionally administered, may be indicated, especially at night, when the patient is very restless. I have administered morphine in quarter of grain doses every four hours, when it only stupified the patient for the time being, but as far as any curative effect was concerned, that was absolutely *nil*, nor did it relieve the pain.

Rubefacients of tinctures of belladonna, aconite, opium and capsicum had no effect in subduing pain. I also resorted to turpentine, and chloroform; these expedients seemed to be of doubtful utility, and the irritants on the contrary made the patient feel much worse, that is, the limb became more painful. Who has not been at a loss what to do, when all these measures failed? Hot fomentations of the different anodyne decoctions were alike disappointing; I was convinced to believe that they actually do harm by encouraging suppuration in the cellular tissue, which is certainly a very undesirable result and should be prevented, when in our power to do so.

If we take into consideration the great progress which pharmaceutical chemistry has made within the last few years, the many new remedies which science and art have invented, one feels diffident to assert that, among all these, the physician, at an hour and moment when he needs a remedy, most all these productions fail to accomplish