## THE CANADA MEDICAL RECORD.

## VoL. XV.

## MONTREAL, OCTOBER, 1886.

No. 1.

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SOME POINTS CONNECTED WITH OVARIAN-UTERINE OPERATIONS. By E. H. TRENHOLME, M.D.

Professor of Gynecology in the Medical Faculty University of Bishop's College, Montreal.

(Read before the Canadian Mcdical Association, Quebec, 19th August, 1886.)

In this brief paper it is my desire to refer to some of the details connected with operations for the removal of the uterus, or its appendages.

It is not my intention to refer to the diagnosis of uterine ovarian disease, nor deal with the after treatment, to any great extent.

With regard to the preparing of the patient for the operation, I would advise you not to resort to purgatives, especially avoid aloes and castor oil, both of which favor congestion of the hemorrhoidal vessels, and consequently renders the patient more liable to inflammatory action. The bowels should be brought into gentle action by diet and mild laxatives; avoid emptying the bladder, especially in extirpation of the uterus, its presence being easily recognized when full and not so liable to be injured; the legs should be wrapped in cotton wool, especially in cold weather, and the temperature of the operating room not less than  $85^{\circ}$ . The cotton wool can be removed after reaction has been established.

There should be ready for usc, a couple of dozen of hot towels, which are to be applied, as need may arise, around the body and over the abdomen during the operation; the temperature of the exposed bowels and surface of the body can in this way be easily maintained. It also protects the patient from escaped fluid and blood.

I prefer to stand on the right side of the table, which is placed diagonal to the window, so as to allow the light to fall directly upon the abdomen of the patient.

The instruments required for these operations need not be very numerous nor complicated; generally speaking a scalpel, scissors, director, half a dozen Keberly's forceps, three or four sponges, silver wire, shoemakers' thread, and horse hair, a needle-holder and needles will suffice. I would press the importance of having clean sponges, instruments and hands, and allow no explorations of the parts during the operation by other hands than your own. Not only must the sponges be clean, but they require careful washing during the operation in plain water, and then squeezed out of carbolized water before handing back to the operator. This part of the work should be entrusted to a competent assistant; abundance of boiling water and water that has been boiled only should be used. If this is attended to it matters little whether or no carbolic acid is used. It is well, however, to have all instruments, at the time of operation, kept in I to 20 solution of carbolic acid.

For ligating the pedicle and all vessels, No. 20 shoemakers' white thread, single or double, well carbolized, is all that is needed. My reasons for pre ferring this ligature to all others are, that it is quite strong enough, even single, to secure all the vessels