

kinds of applications, including electricity, how much more difficult must it be, if not impossible, to cure a similar condition in the Fallopian tubes, organs placed beyond the reach of topical applications, opening into a large and readily infected serous cavity, fastened to organs undergoing great changes every month, and irritated by the discharge of marital duties? Such tubes as I

I show also a plate pointing out the microscopical appearances of the interior of the diseased and healthy tube. The plates were drawn from preparations made by myself. Two different points in the interior of the diseased tube have been chosen, one to show the partial loss of epithelium and the presence of only ill-developed epithelium without cilia, and the other to show the total

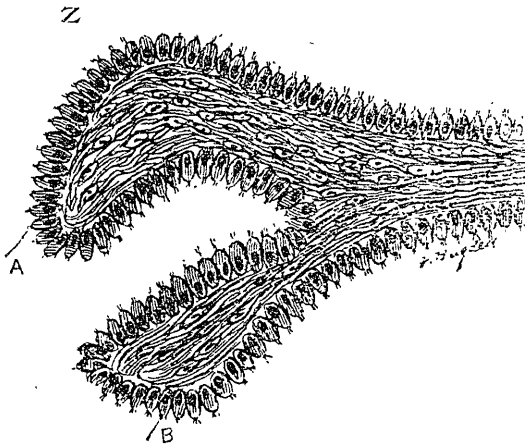
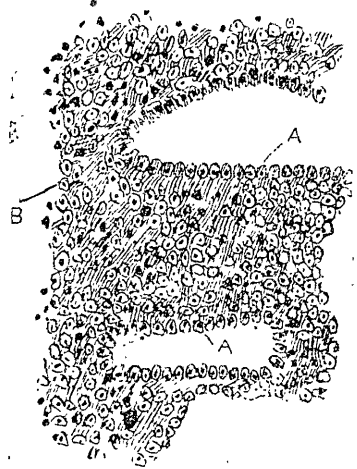
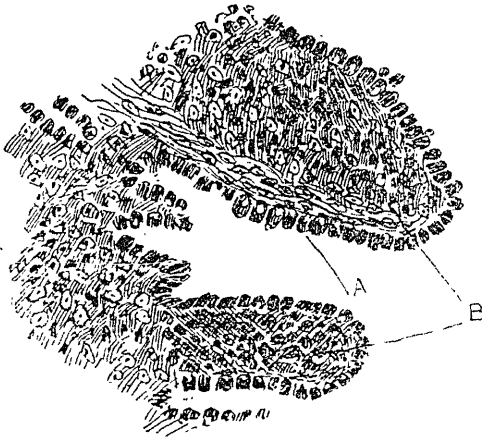


PLATE No. IX.

*Z. A. Epithelium, in part destroyed; cilia gone. B. Inflammatory, new formation cells. 1. A. Epithelium left in spaces by agglutination of villi. B. Free surface covered with inflammatory cells. Z. Villi from healthy tube.*

show here must come out, if the patients are to be permanently cured. Because occasionally a mistake in diagnosis is made, or because occasionally a case may go on in apparent health, with a sealed pus tube that permits no escape of its contents, are we, therefore, to let the great majority of the cases drift into chronic invalidism? They do not die early in a great many cases, but they are not cured, though they try all kinds of medicines and all kinds of practitioners. Operation, urged so forcibly on the profession for years by Tait, a profession still imbued with the old vague ideas of a peculiar inflammation of pelvic cellular tissue, and with equally vague ideas of its origin and the cause of its recurrence at irregular and frequently long intervals, will cure these cases.

loss of epithelium on the free surface of the villi, *i.e.*, toward the lumen of the tube and the agglutination of the villi, leaving small spaces lined with epithelium. Then we have a careful drawing of a beautiful preparation showing the normal condition.

As to the removal of ovaries and tubes to relieve hemorrhage produced by the presence of myoma, I will

say nothing now. Whether the operation will fulfil all that is expected of it by its supporters, will be determined in time. For the present I intend to continue to perform the operation.

As to the use of electricity in the cases in which I am convinced nothing but the knife will suffice, I may say I regard it as a veritable "will-o'-the-wisp," and an expensive one to the patient's husband. This opinion is gaining