

groin of a woman laboring under all the symptoms of puerperal fever, where he suspected pus by the symptoms alone, but where, as he told me, there were no outward signs of its presence, no swelling, and no local tenderness. From a condition almost of collapse, recovery took place. The operation was not, 'tis true, a difficult one. Anyone could have performed it; but the diagnosis was prophetic.

The case of Dr. Leslie Phillips, operated upon by John W. Taylor, F.R.C.S., is of like character; and now that attention has been directed to the subject, and that surgery has taught a means of escape, deaths from supposed puerperal fever will, it is hoped, be less frequent than formerly. Here, as you will see, surgery comes to the relief of the obstetric physician in cases which are peculiarly within the province of the latter.

In diseases of the abdominal organs, how much has lately been done by surgery. Hepatitis, with all its train of sufferings, was claimed by medicine as its own; but surgery of the liver has suddenly leaped into importance lately. A painful, inflamed and enlarged liver is now relieved by Harley and others, and the patient cured by the insertion into it, at its upper and convex part, of a long trocar, and by the drawing directly therefrom as large a quantity of blood as was considered prudent to be taken from the arm in the days of venesection. Operation for draining hepatic abscesses or removing hepatic cysts; cholecystotomy for crushing or taking calculi from the gall-bladder; laparotomy for purulent or persistent peritonitis; abdominal sections for internal hemorrhage, etc., are all of recent date, and open a field, not of brilliant operative procedures, but of more brilliant diagnosis, and what is of greater moment, of far more beneficial results.

The considerable degree of immunity from danger which has attended abdominal sections has led to the spaying of females—married and unmarried—for sometimes real—sometimes, it is believed, unreal sufferings. This operation has been performed for objective disturbances, and for disturbances purely subjective. Prolapsus of the ovary, a common affection; atrophy of the ovary, not easily diagnosed; œdematous ovary; a pultaceous condition of the ovary; cirrhotic ovary; hydrosalpinx; in pyosalpinx *pur et simple*, often guessed at by raised temperature alone; in pyosalpinx resulting from gonorrhœa; in that condition of neurosis whose shapes are

endless and whose outward hysterical manifestations are innumerable; in localized peritonitis where the intestines, omentum, etc., are glued together, etc.; in inflammatory conditions after confinement, especially in the acute and subacute stage; in deformity, where the birth of a living child might be *reasonably* expected to prove fatal to the mother; in uterine myomata, where the size of the growth is inconvenient; in bleeding myomata; in (who would believe it?) all cases of uterine myomata in patients under 40 years of age; in retroflexed and anteflexed uterus; in epilepsy; in hystero-epilepsy; in every case of insanity in the female!!

Here, as you will perceive, I have said nothing of those considerable tumors of the ovary or tubes—cystic, fibrocystic or malignant—which all agree may demand removal. Is it to be wondered at that this operation should be resorted to with a frequency which is alarming? Oöphorectomy is to-day epidemic in many places on the other and on this side of the Atlantic. Occasionally an authority, such as Thomas More Madden, in Europe, writes that the operation of laparotomy is performed "too frequently" and in unsuitable cases; and Emmet, on this side, stems the tide somewhat by saying that for a year he had seen but one case of disease of the tubes where the operation might be justifiable, that the patient refused to be operated upon, and got well in a few months. Yet every one knows Emmet's unsurpassed field of clinical observation. In one hospital in Liverpool, says Dr. Carter, no less than 111 women had been deprived of one or both ovaries during the year 1885, said to be about one-third of all the patients admitted. This frequency continued in 1886, and led to a commission of enquiry. Canada has many oöphorectomists and salpingotomists. The *Canada Lancet* has denounced the epidemic, and at our own Medico-Chirurgical Society, ovaries are sometimes fished up from the depths of the pocket—sometimes the vest pocket,—and, sometimes it has happened that so able a pathologist as Prof. Osler has, after close inspection, declared he found nothing abnormal in them. The fashion, doubtless, will soon change; diagnosis of affections of the appendages will, in the meantime, have been much advanced; and the question of operation will have been settled in accordance with those general principles which should guide all prudent and honorable men in its performance or rejection. This question has a moral and a