

GYNECOLOGY.

UNDER THE CHARGE OF

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ASSISTED BY

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Statistics of Uterine Cancer.—WALDSTEIN (*Centralblatt für Gynäkologie*, No. 50, 1901) from a careful analysis of the record of Schanta's clinic finds that a little over 14 per cent. of the cases of cancer of the uterus were operable. Of these, 8.8 per cent. succumbed to the operation. The writer concludes that less than 4 per cent. of all patients with uterine cancer are really cured by radical operation.

Dysmenorrhœa.—MENGE (*Centralblatt für Gynäkologie*, No. 50, 1901) distinguishes two forms of dysmenorrhœa, the so-called idiopathic, which is independent of pelvic disease, and the "secondary" which is due to disease of the genital tract. The writer believes that painful menstruation, from whatever cause, is referable to the tendency to uterine contraction which is present at the time of the monthly period. These are due not only to the premenstrual swelling of the endometrium described by Fritsch, but also to the mere presence of blood within the uterine cavity, which acts as a foreign body. These contractions in healthy women are insensible. In hysterical or neurasthenic subjects, on the contrary, the uterus, though entirely normal, is hyperæsthetic and dysmenorrhœa results. Mechanical obstruction to the escape of blood, added to this hyperæsthesia, increases this pain. In diseased conditions of the pelvic organs the dysmenorrhœa is more pronounced, especially if the two former factors are also present. Hence the deduction: Normal menstruation, as well as dysmenorrhœa, is accompanied by pains simulating labor-pains, although the latter may be entirely of nervous origin. It follows that local treatment alone is not sufficient to insure permanent relief, but the general nervous condition of each patient must be carefully considered.

The writer rejects the theory of a reflex nasal origin of dysmenorrhœa. Though he has seen some brilliant results from cocaineization of the nasal mucous membrane, he is inclined to regard this as principally an application of the method of suggestion.

Fibromyoma in Cul-de-sac of Douglas.—ROSENSTEIN (*Centralblatt für Gynäkologie*, No. 50, 1901) reports a case of tumor in Douglas' pouch, which was diagnosed as an ovarian cyst with twisted pedicle. On opening the abdomen a fibromyoma was found behind the uterus with a pedicle, which was attached to the right side of the cul-de-sac. There were numerous intestinal adhesions. The writer inferred that the growth developed

from the smooth muscular fibres of the sacro-uterine ligament, and could find no similar case on record.

[Several years ago we reported a case of fibromyoma, which sprung from the under surface of the sacro-uterine ligament and grew downward into the posterior vaginal fornix, so that it was easily removed per vaginam. It seems possible that the tumor in the case above mentioned may have been an aberrant, or migratory, fibromyoma of the uterus.—ED.]

Parametritis Posterior.—BRÖSE (*Zeitschrift für Geb. und Gynäkologie*, Band xlv., Heft 1) reports ten cases in which, after a long course of unsuccessful treatment, ventrofixation was performed. In five cases a pure parametritis was found, the peritoneum not being affected; in two the disease of the adnexa was mistaken for parametritis. Seven patients were cured; in one case there was a recurrence, and two were failures.

[The writer states that the uterus was anteфлекed, which leads one to ask whether tenotomy of the shortened sacro-uterine ligaments previous to ventrofixation of the uterus would not meet the indication more perfectly. This we have done in several instances with satisfactory results.—ED.]

Influence of Pregnancy and the Climacteric on the Ultimate Results of Operations for Cancer.—HEVSE (*Centralblatt für Gynäkologie*, No. 51, 1901) collected 122 cases in which the cancerous uterus was removed during pregnancy or the puerperium. Eighty-two of these were selected, in which at least five years had elapsed since the operation, but only 41 of these were suitable for comparison. Of these a radical cure was obtained in 24 per cent. Of 73 cases of hysterectomy for cancer in patients who had passed the climacteric, 50 per cent. were cured. These statistics would seem to show that pregnancy has an unfavorable influence on the prognosis, while the reverse is true of the climacteric.

Indications for Operation in Chronic Salpingitis.—LEGUEN (*Revue prat. d'Obstétrique et de Gynécologie*, No. 9, 1901) recognizes three indications for operation, viz.: 1. The general condition of the patient, especially in the presence of fever and constitutional symptoms; 2, the local condition, i. e., well-marked enlargements of the adnexa, or fistulous communications with the bladder or rectum; 3, severe and persistent pain, which is not relieved by treatment continued for several months.

Enlargement of the Inguinal Glands in Cancer of the Viscera.—VINAY (*Lyon Méd.*, No. 38, 1901) lays considerable stress upon this condition as a diagnostic sign of cancer of the pelvic and abdominal viscera. It is most frequently observed in the former class of cases. He distinguishes three forms of glandular enlargement, viz., simple inflammatory or pre-cancerous, metastatic, and inflammatory resulting from infection of ulcerating cancerous growths. This infection may follow the course of the direct lymphatics, as in cancer of the uterus, or may be carried through the superficial lymph-vessels from the umbilicus, when disease of the abdominal viscera has extended to the parietes. The glands are at first hard, movable, and painless, then they become adherent and painful in consequence of repeated