case in one semester from chloroform narcosis. The good results from primary surgical operations are largely due to strict antiseptic detail, for in manner, method, appliance and detail our surgery is finer, cleaner, and more ingenious. Some of the mechanical devices in use, especially in gynecology, are extremely clumsy and cumbersome. I cannot imagine German manners of examination, and German methods being carried out at home. They would scarcely be tolerated, and would be abhorrent to the greater sensitiveness of our women, even of the most debased. So far as my observation goes, we do very much better gynecological work in the United States than is done in Berlin, and nowhere can a medical man see better work upon the eye, or have more extended facilities for observation than in New York. For the special histology of the normal eye, Moorfield's, London, Eng., is the best and only place I know. There is no such course given here. Two matters in surgery have impressed themselves upon me since my arrival in Berlin, with convincing force—one is that the intra-peritoneal treatment of the pedicle is the most correct one; and that there is a wide and growing field for conservative gynecology. This is dangerous ground for a man with hobbies, and I may not traverse it, lest I become prolix. Suffice it to say that I am very strongly of the opinion that many cases would do better but for meddlesome interference—that the surgeon's skill is too often called into service, and that extirpation of the uterus, by any method, for malignant disease, exposes the patient to a terrible risk, and is but tentative in its results. There is much special and general surgery here—much that is good and necessary, much that is unnecessary, and some that is bad. I do not consider it good work to amputate the anterior cervical lip for a simple hypertrophy, not excessive and not accompanied with symptoms of bodily disorder. I do not consider it necessary to operate upon a woman 68 years of age for a malignant orbital tumor, when the result of such operation will be fatal in the great majority of cases. I do not consider it wholesome gynecology to sew up every lacerated cervix, to dilate in every uncomplicated case of endometritis, to operate in every instance of fibroma, of myoma or carcinoma, or to use intra-uterine injections of strong, saturated liquors of iron, iodoform or iodine as frequently as I have seen them used. I *despise* pessaries, and most of all the big, unwieldy ones that are the fashion here. It is not uncommon among some professional men here to feign a disbelief in the efficacy of any method not purely of Berlin origin, and to cling with fanatical clanishness to unwieldy devices simply because they are indigenous. If our German brothers can teach us pathology, histology, and exactness in examination, which they certainly can do, they can learn much from us in elegant surgery, in light and effective mechanical devices, and in conservative practice.

H. R. B.

DOMESTIC CORRESPONDENCE.

SECTION ON DISEASES OF CHILDREN.

DR. N. S. DAVIS, EDITOR JOUR. AM. MED. ASSO.,
CHICAGO, ILL.:

Dear Sir—Will you, through the columns of the JOURNAL, please request those who intend reading papers before the "Section on the Diseases of Children" to be kind enough to send the title of their papers, by the last week in March, to the Secretary of the Section, Dr. S. S. Adams, Washington, D. C., or to me, at Marshall, Texas.

It is necessary to know the titles of the several papers to be presented, so that the committee of arrangements may be informed at least one month before the meeting of the Association, the last Tuesday in April, and we trust that no one will fail to notify us in due time. Very respectfully,

JOHN H. POPE,
Ch'm'n Sec. on Dis. Child., Am. Med. Ass.

NECROLOGY.

REED, JOSEPH ALLISON, M.D., of Dixmont, Allegheny county, Pa., was born in Washington, Pa., December 31, 1823, of Scotch-Irish parentage, and died November 6, 1884.

He received his classical education at Washington College, Pa., where he graduated A.M. in 1842, after which he began the study of medicine in the office of Julius Le Moyne, M.D., the noted abolitionist of Western Pennsylvania, receiving his degree of M.D. from the Jefferson Medical College in 1847.

Shortly after he located in Allegheny City, where he in a short time established himself in a large and lucrative practice. Having a special aptitude for the study and treatment of mental diseases, he was, upon the establishment of the insane department of the Western Pennsylvania Hospital, at Pittsburgh, in 1854, chosen physician in chief.

In 1857, the hospital having in the meantime been set apart exclusively for the care of the insane of the western district of Pennsylvania, Dr. Reed was appointed resident physician and superintendent.

Upon taking charge of the hospital it contained within its wards twenty-three patients, was in debt, and affairs were in the worst possible condition. With characteristic promptness and energy he soon raised the amount necessary to relieve the institution from debt, and provide food and clothing for the starving inmates, in a short time placing the institution on an equal standing with others of the same class.

Through his efforts and those of the widely-known philanthropist, Miss Dix, appropriations were obtained from the Legislature for the construction of a new hospital, to be located seven miles west of Pittsburgh, on the north bank of the Ohio river, and under his immediate supervision the present exceptionally commodious edifice at Dixmont was erected.

CHARLES W. SHUMWAY, M.D., for nearly 30 years an active and respected practitioner of this city, died on the 19th inst., from diabetes.