necrosis is present (unless there is actual pyometra) there is no increase in the white cells, probably because the sloughs are rapidly cast off and there is little absorption. No increase is observed when the lymph nodes are affected. Among the cases of fibromyoma which were studied with especial reference to leukocytosis, this was noted in only a single instance as a post-hemorrhagic phenomenon.

After the evacuation of abscesses by colpotomy a diminution in the number of leukocytes was promptly noted, unless pus-foci were not thoroughly drained. After abdominal section in pus cases there was at first a marked increase, which gradually declined to the normal if the case progressed smoothly. Imperfect drainage, mural abscess, etc., caused a fresh increase in the number of leukocytes. Even in aseptic cases the same degree of leukocytosis was noted on the first day after operation, although there might be no accompanying elevation of temperature. The writer explains this phenomenon on the theory that in every operation, no matter how aseptic, a certain amount of infectious material is introduced into the wound, the absorption of which into the circulation produces a marked irritation of the leukocytes.

Further observations during normal pregnancy and labor led the writer to the following conclusions: Leukocytosis is seldom found at the end of pregnancy. There is an increase during labor, most marked if the pains are severe and the labor prolonged. The maximum is reached an hour or two after the completion of the third stage. There is a gradual decline to normal on the fourth day.

The Uterus in Ectopic Gestation.—CAZEAX (*Revue prat. d'obstétrique et de pédiatrie*, November, 1903) finds that in ectopic gestation the uterine mucosa is intensely congested and hypertrophied, interstitial hemorrhages being frequent. This explains why the passage of the curette usually causes bleeding. The pseudomembrane is rarely expelled in the shape of casts of the uterine cavity, the shreds being more often overlooked in the accompanying blood. This usually occurs early in the pregnancy, and does not by any means imply the death of the product of conception, but it is usually indicative of rupture or tubal abortion.

Cancerous Degeneration of the Cervix after Supravaginal Amputation.—RICHELOT (*Annales de gyn. et d'obstétrique*, December, 1903) concludes a paper on this subject with a positive expression of his preference for pan-hysterectomy in cases of fibroid where a radical operation is indicated.

He also believes that fibromyomata are only relatively benign. While, of course, it is not always necessary to remove them, he has seen too many patients with these neoplasms succumb to phlebitis or visceral disease, while under observation, to regard them as entirely innocent. While sarcomatous degeneration is rare, he does believe that cancer frequently develops in fibroid uteri in consequence of the accompanying endometritis. He cites two cases from his own practice and ten from the literature in which the cervix became cancerous after supravaginal amputation.

Obliteration of the Tubes.—RONSSE (*Annales de gyn. et d'obstétrique*, December, 1903), from experiments on animals, concludes that the