

upon the nerves of the ovary by the growing follicles that excites the menstrual flow, but the activity of the corpus luteum, since the latter presides over the periodical hyperæmia of the uterus which terminates in either menstruation or pregnancy.

Direct Illumination in Gynecology.—D. DE OTT (abstract of monograph in *Annales de gyn. et d'obstétrique*, Feb., 1904) advocates the general application of electric illumination in gynecological examinations and operations, using a number of simple appliances which are clearly figured and explained in his original *brochure*. A suitable head mirror is worn by the operator during abdominal and vaginal cœliotomies, the patient being in the exaggerated Trendelenburg posture on a special table.

Examinations of the rectum and bladder are similarly conducted, the interior of the latter viscus being exposed by separating the opposing surfaces of the urethral and vesical sphincter by means of small retractors, instead of with an endoscope. One blade of the retractor carries an electric light.

(The French editor properly calls attention to the fact that the advantages of extreme pelvic elevation during examination of the bladder were long ago recognized by American gynecologists, and that there is nothing new about the method of illumination.)

Torsion of the Pedicle.—HAMMER (Inaugural Dissertation; abstract in *Zentralblatt f. Gynäkologie*, No. 5, 1904) analyzes 43 cases of torsion of the pedicle noted in 248 ovariectomies at the Würzburg clinic. In 7 per cent. there were sudden colicky pains; in 60.5 per cent. several minor attacks were noted; 32.5 per cent. were unattended with symptoms, the condition being found at the time of operation. Torsion occurred in 32 cystadenomata, 4 dermoids, 3 parovarian cysts, 1 fibroma, and 1 cystosarcoma. Twenty-three torsions were from left to right and 18 in the opposite direction.

The writer agrees with Hofmeier that unsymmetrical development of the neoplasm is the direct cause of the accident, pregnancy having little influence upon it. All the patients recovered but two, who were in collapse when admitted.

Late Recurrence of Mammary Cancer.—MARGGRAFF (Würzburg Inaugural; abstracted in *Zentralblatt f. Gynäkologie*, No. 5, 1904), in reporting a case of recurrence eight years after amputation of the breast for scirrhous, analyzes 350 cases in which the disease reappeared in 430 (50 per cent.). The longest period of immunity was eleven years.

(We have recently removed a recurrent cancerous nodule thirteen years after the primary operation.—H. C. C.)

Pathology of Uterine Fibroids.—WATT-KEEN (abstract of Inaugural Dissertation in *Zentralblatt f. Gynäkologie*, No. 5, 1904) in 417 cases from Hofmeier's clinic notes the following complications: ovarian cyst, 27; diseased tubes, 19; hernia, 7; uterine displacements, 14; carcinoma and sarcoma of the corpus uteri, 9. Myxomatous degeneration of the fibroid was present in 8 and necrosis in 8. Twenty per cent. of the married women were sterile.

Myomectomy (abdominal) was performed 123 times, supravaginal amputation 44, total extirpation 15. Forty-five vaginal myomectomies

and 43 total hysterectomies were performed. The total mortality after all operations was only 6.48 per cent.

Tuberculosis of the Tubes.—FELLENBERG (*Zentralblatt f. Gynäkologie*, No. 5, 1904) reports 10 cases from the Bern clinic in which the diagnosis was confirmed microscopically. All the patients were nulliparæ; in none were there any characteristic symptoms, and no ulcerations were present on the vagina or cervix. The peritoneum was affected in two cases and the ovary only once, the uterus being free from disease in every instance.

The writer regards the prognosis after salpingectomy as generally favorable. In this respect he differs from those who advocate extirpation of the uterus and adnexa in every case of tuberculosis of the tubes.

Pruritus Vulvæ.—LORAND (*La polyclinique*, vol. xii., No. 6) believes that diabetes is the etiological factor in the majority of the cases, and that it is frequently overlooked because the urine is not carefully and repeatedly examined, especially after giving test meals.

Three conditions may favor the development of pruritus in diabetes, viz.: 1. The toxic influence of the blood. 2. Direct irritation from the urine, which is rich in uric acid, as well as sugar. 3. Local hyperæsthesia of nervous origin. As regards treatment, the writer states that in addition to regulation of the diet he has obtained good results from the use of ointments containing 10 per cent. naphthalin and anæsthesin.

Torsion of the Omentum.—VIGNARD and GIRANDEAU (*La polyclinique*, vol. xii., No. 6) add 2 new cases to the 18 already reported. In both the symptoms warranted the diagnosis of appendicitis, the true condition being found only at the time of the operation. Of the 20 recorded cases 15 occurred in men and 5 in women. In all a hernia existed, so that this condition is evidently the principal etiological factor. The diagnosis is obscure and can seldom be made before operation. The treatment consists in resection of the affected portion of omentum above the point of torsion.

Decidnoma Malignum after the Menopause.—McCANN (*British Obstet. and Gyn. Journal*, No. 3, 1903) reports the case of a woman, aged fifty-three years, who had borne ten children, the last nine years before. Menstruation had ceased a year and a half before she came under observation, complaining of profuse metrorrhagia of four weeks' duration. The patient succumbed on the sixth day after hysterectomy. Examination of the uterus showed the presence of a deciduoma malignum.

Vaccinia of the Female Genitals.—LÖWENBACH (*Monatshefte f. prakt. Dermatologie*, Band xxvi.) states that he has observed four cases in which healthy women were infected on the genitals from individuals who had been recently vaccinated. He was able to find only one other similar recorded case. Infection took place through the medium of clothes, by direct contact, scratching, and in one instance because a physician who had dressed a vaccination sore on a child's arm made a vaginal examination of the mother without washing his hands. In the early stage the vesicle must be differentiated from pemphigus, eczema, and herpes, in the later stage from the syphilides.