

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 celiotomies, 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 scirrhus, 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