the 10 cases was the treatment completely unsuccessful in affecting the flow.

The general changes produced in their cases by this treatment varied. Some patients complained of mild fatigue, while in others there was relatively severe prostration. In a few the treatment had a stimulating effect. The changes in the skin, exposed to the rays, were slight, the most severe being a mild dermatitis. Aside from the local changes of the pelvic organs already mentioned only in one case developed a generalized pelvic inflammatory process several months after the last treatment.

Some patients had prolonged and severe "flushing". A majority gained in weight, but in no instance was noticed any loss of the feminine qualities of mind or body.

In conclusion the writers believe (1) that x-ray treatment should be the method of choice in women over thirty-eight years of age for all uncomplicated cases of severe hemorrhage due to chronic metritis or other conditions in which no neoplasm is present; (2) in uncomplicated fibroid tumors not exceeding the height of the umbilicus, occurring in patients over thirty-eight years of age x-ray should be regarded as the method of choice, and (3) all cases should undergo a careful and complete gynecologic examination to exclude malignancy, degenerating fibroid, and inflammatory complications before being subjected to this treatment.

Knox: Treatment of Uterine Fibroids by Radiation. British Medical Journal, 1920, No. 3119, p. 535.

The author advocates very strongly the management of cases of uterine fibroids by gynecologists and radiologists working in conjunction. He thinks gynecologists must recognize x-rays and radium as valuable adjuncts in treatment. The Coolidge tube offers distinct advantages. Most satisfactory is a 3 millimeter filter of aluminum with a secondary filter consisting of chamois, thick paper, and a loofah sponge. He gives as contraindications to treatment by x-ray and radium: (1) calcareous degeneration, (2) most forms of extensive degeneration, (3) possible malignant disease of the uterus, (4) infective conditions, (5) inflammatory conditions of adjacent organs, and (6) submucous pedunculated fibroids. In his opinion radium possesses certain advantages over the x-rays, most important among them the facility of application and the accuracy of dosage.

F. L. Adair.

Williamson: Advantages and Disadvantages of X-ray Treatment. British Medical Journal, 1920, No. 3119, p. 537.

The author wishes for a better understanding of the problem by both the radiologists and gynecologists. He emphasizes the almost certain favorable operative results in the treatment of fibroid, and points to the fact that not all cases are suitable for x-ray treatment. Unsuitable are (1) patients under forty years of age, (2) all cases favorabe for myomectomy, (3) degenerative changes in the fibroid, (4) large tumors, (5) recent or old inflammatory lesions of tubes or ovaries, (6) malignancy, (7) pressure symptoms upon bladder, rectum, nerve trunks or veins, (8) fibroids complicated with ovarian cysts, (9)