

In most cases, if nothing more than palliation is accomplished, the patient is highly satisfied in comparison with his previous condition.

This simple method of Landerer, because of its conservative nature, can have a more extensive application than the ligation method of Trendelenburg, or the extirpation of the veins as recommended by Schede, Madelung, and Bœennecken.—*Deutsche medizinische Wochenschrift*, No. 34, 1893.

JAMES P. WARBASSE (Brooklyn).

FEMALE GENITO-URINARY ORGANS.

Ligation of both Internal Iliac Arteries for Hæmorrhage in Hysterectomy for Carcinoma Uteri. By Dr. H. A. KELLY (Baltimore). The reporter, in the course of an operation through an abdominal incision to remove a carcinomatous uterus, found the broad ligament to be extensively infiltrated. As the result of attempts to tie them off, they proved so friable as to cause the ligatures to cut out, and to allow of such profuse and uncontrollable hæmorrhage that the entire arrest of the direct blood-supply to the pelvis by ligation of the internal iliac arteries was necessitated. Accordingly, the peritoneum over the arteries was incised and ligatures passed around them by a curved aneurism-needle. The operation was then proceeded with without further hæmorrhage. The left ureter was embedded in a carcinomatous mass, but was safely enucleated. An intra-arterial saline infusion, half a litre in amount, was done to overcome the effects of the loss of blood. It was evident that much infiltrated material remained behind in the stumps of the broad ligament at the close of the operation. The patient made a slow but satisfactory recovery. Five months later, after most careful examination by rectum, vagina, and abdomen, not the slightest trace of carcinoma could be detected. A further report of the after-history of this case will be very desirable.—*Johns Hopkins Hospital Bulletin*, April, 1894.