

lapsus extending over a period of five years. His conclusions are as follows: All cases of prolapse of the vagina without retroversion should be treated by extensive plastic operations. In cases in which there is accompanying retroversion and prolapsus, with or without fixation of the uterus, ventrofixation should also be done. Vaginofixation with plastic operations is indicated in patients who have passed the climacteric, and rarely in cases of complete procidentia. In short, the writer prefers ventrofixation to shortening of the round ligaments as the routine treatment of retroflexion, whether the uterus is adherent or mobile.

Origin of Broad Ligament Cysts.—HANDLEY (*Journ. Obst. and Gyn. of British Empire*, 1903, No. 11) advances the ingenious theory that all cysts of the broad ligaments situated above the tubes, and which can be enucleated, develop through the distention of necessary tubes. This he infers because he has found such cysts communicating with normal Fallopian tubes, and showing on their inner walls folds identical with those found in specimens of hydrosalpinx.

Isolation of the Pelvic Cavity with a Flap of Peritoneum and Fascia.—KRÖNING (*Zentralblatt für Gynäkologie*, 1904, No. 31) recommends this method of shutting off the pelvic from the general peritoneal cavity, especially after abdominal hysterectomy for cancer of the uterus. Instead of using peritoneal flaps alone, he strips off the parietal fascia also, both anteriorly and posteriorly. Two cases are reported, one of which terminated fatally.

Cause of Hemorrhage in Fibroids.—THEILHABER and HOLLINGER (*Archiv für Gynäkologie*, Band lxxi., Heft 2) from an examination of nineteen fibroid uteri demonstrated the erroneous nature of the view that the bleeding in these cases is due to hyperplasia of the endometrium. Atrophy of the mucosa was more often present than hypertrophy. The writers believe that the "myofibrosis" of the uterine wall is the true cause. In consequence of this condition the vessels cannot contract normally during menstruation. Muscular contractions in the tumor and excessive congestion from psychical influences are other factors.

Anatomy of Placental Polypi.—CURTIS and 'OUI contribute an extended article on this subject to the *Annales de Gynécologie et d'Obstétrique*, July, 1904, of which the following is a summary: The structure of placental polypus, or so-called *deciduoma benignum*, is more complex than is usually supposed. It includes both the fetal and the maternal elements of the placenta, has a special vascular supply, and is capable of continuous growth, like a true neoplasm. Its nutrition depends on variations in the maternal circulation, the imperfectly obliterated intervillous spaces being in direct communication with the vessels in the submucosa. The layer of Langhans and the syncytium tend to proliferate, but there is never any tendency to invasion of the uterine tissue, as Michaelis claims. The writers disagree with Hirtmann and Toupet, who claim that the distinguishing feature of these polypi is the presence of bloodvessels in the chorionic villi. They regard the persistence of the syncytium as the principal element in the

diagnosis, since the latter cannot exist without a free vascular supply. The most important inference is that such polypi under unknown conditions may become malignant.

DERMATOLOGY.

UNDER THE CHARGE OF

LOUIS A. DUHRING, M.D.,

PROFESSOR OF DERMATOLOGY IN THE UNIVERSITY OF PENNSYLVANIA,

AND

MILTON B. HARTZELL, M.D.,

INSTRUCTOR IN DERMATOLOGY IN THE UNIVERSITY OF PENNSYLVANIA.

Papilloma of the Sole.—T. D. BERRY (*Journal of Cutaneous Diseases*, May, 1904) reports a personal case of this disease and refers to the case described by D. W. Montgomery in the *Journal of the American Medical Association*, July 11, 1903. The author, while designating the disease "papilloma," throughout his remarks refers to it as a wart. It was extremely rebellious to all manner of treatment, being finally cured by the Paquelia cautery, burning entirely through the skin of the sole and into the fatty cushion beneath, and then turning the point round and round until there was a hole left in which the blunt end of a lead-pencil could have been inserted. Six months later there was no recurrence.

Effect of Becquerel Rays upon Tissues.—HALKIN (*Arch. für Derm. und Syph.*, 1903, lxx. p. 201) found that the bloodvessels seem to be first affected, but that the action on these structures cannot be regarded as the cause of the other phenomena, much less that of the inflammation. There appears to be a lack of resistance of the bloodvessels due to a form of paralysis. In normal and in lupus tissues, after prolonged exposure daily for nineteen days, cellular degeneration, dilatation of the vessels, and hemorrhage was noted in the superficial layers, but the deeper layers were not affected.

A Series of Cases Treated by Radium.—HARTIGAN (*British Journal of Dermatology*, March, 1904, p. 105) brought before the Dermatological Society of Great Britain and Ireland a number of cases of cutaneous disease, chiefly rodent ulcer and lupus. The radium used weighed ten milligrams, and was contained in an excavation at the end of a vulcanite screw and covered with a mica plate, which in turn was secured by a brass cap having a window in it. It fitted into an outer vulcanite case, admitting of the screw being withdrawn or projected. The results obtained were very encouraging.

Reference may be made in particular to a case of *nævus vasculosus* or "port-wine mark" in a woman, aged twenty-six years, which had existed from birth, having since then extended somewhat. It was on the left cheek, extending from the eyelid to the upper lip and on the nose. The upper half received in all eight applications and the lower three