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OBSTETRICS for January, 1893.



A MENSTRUAL DERMATO-NEUROSIS.¹

Dr. EDEBOHLS also presented a patient with a *Menstrual Dermatitis of the Face*.

He had already presented the patient to the Society at its meeting of December 15, 1891, and showed her again this evening for the purpose of reporting further upon her case as he had promised to do. The full history of the patient and description of the rash are recorded in the Transactions of the Society. (NEW YORK JOURNAL GYNÆCOLOGY AND OBSTETRICS, January, 1892, p. 55.) He would not repeat further than to say that from the age of fifteen until presented to the Society at nineteen the girl had suffered at each menstrual epoch—with the exception of an interval of eight months at the age of eighteen—from dysmonorrhœa and

¹Abstract from Transactions of the New York Obstetrical Society, Nov. 15, 1892.



the eruption on the right side of the face depicted in the illustration. On December 22, 1891, Dr. Edebohls treated her endometritis and cartarrhal salpingitis by dilatation of the cervix, curettage and gauze-drainage of the uterus. The result was an entire disappearance of the dysmonorrhœa and menstrual stigma for three months. Then these troubles reappeared, and again, three months later, Dr. Edebohls discovered small cystomata of both ovaries not present at previous examinations. He performed double ovariectomy and ventro-fixation of the uterus on June 28, 1892. A poly-cyst of the left ovary, ten centimeters in diameter, and one of the right ovary, six centimeters in diameter, were removed. The patient had not menstruated nor suffered any pelvic pain since the operation, six months ago. The dermatosis of the face, however, had reappeared with clock-like regularity once a month, and, if anything, was rather more pronounced and intense than formerly. On one occasion it even extended around to the left side of the face, the only time it has ever behaved in this way.

Whether the phenomenon is to be regarded as a *molimen menstruale* of the artificial menopause the developments of the near future will show. Dr. Edebohls would attempt to keep track of the patient, and, if successful, would report again, after the lapse of another year, upon the case.

A VAGINAL IRRIGATING SPECULUM AND LEG-HOLDER.¹

Dr. EDEBOHLS presented his improved self-retaining vaginal speculum, an evolution of the instrument he had had the honor to present to the Society at its meeting of February 3, 1891, and which he had described at length in the *Medical Record*, New York, March 7, 1891. The speculum, as now made, was smaller and more portable, while all the essential characteristics of the former instrument were preserved.

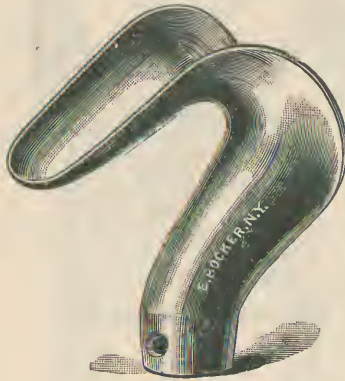


FIG. 1.

Uniformity of shape was secured by having it cast, whereas formerly it was hammered out of copper by hand and proved a fit only by mere chance. E. Bocker, 582 Hudson Street, New York, had overcome the technical difficulties in the way of making a cast, and the instruments as now turned out by him, and by John Reynders & Co., have the advantage of uniform correctness of shape.

Dr. EDEBOHLS also demonstrated his leg-holders for use in gynecological operations and examinations.

They operated upon a principle entirely different from that involved in the use of all other leg-holders of which he had knowledge.

Some leg-holders had no fixed support upon the table, like the well-

¹ Abstract from Transactions of the New York Obstetrical Society, Nov. 15, 1892.

known Clover's crutch and similar devices, in which the knees were drawn upward and held there by bands or straps passing around the neck of the patient or fastened to the legs at the upper end of the table. Others were connected with the table and supported either the

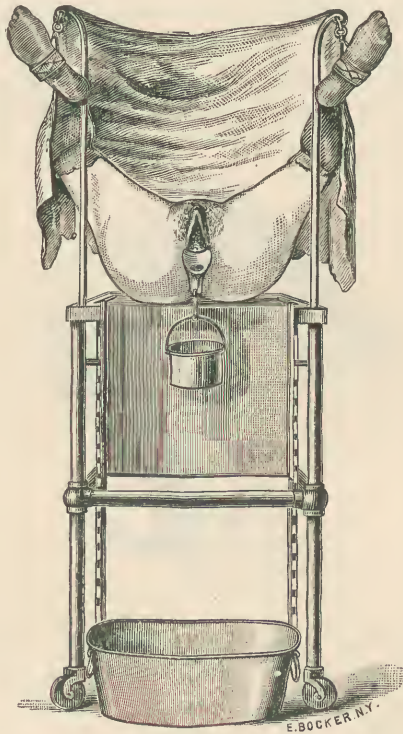


FIG. II.

knee or calf in various ways. In none of them was the foot utilized as the point of support. And yet this suspension of the feet offered advantages to be obtained from no other position.

First of all, it allowed the knees and thighs to gravitate upward and outward in such a way as to relax in the most perfect manner possible the tension of the abdominal walls, an advantage not to be overestimated in the practice of bimanual palpation.

Secondly, it kept the feet well out of the surgeon's way during the performance of an operation.

Thirdly, it protected the patient's legs from being leaned upon during operation by the assistants, and prevented the post-operative pain and soreness of the limbs due to this cause.

Fourthly, it did away with the constriction of the neck and chest of

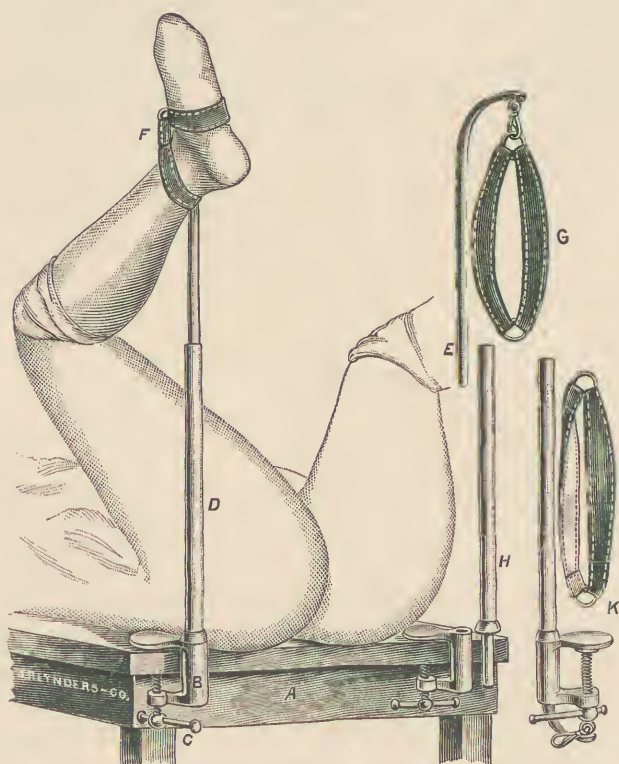


FIG. III.

the patient, and interference with breathing during anaesthesia, associated with the use of Clover's crutch and like apparatus.

Dr. EDEBOHLS had had his leg-holders in constant use upon his operating table for the past two years with uniform satisfaction. He had found them so valuable an adjunct in the practice of bimanual

palpation that he had them attached to the Harvard chair in his office. And finally he had derived a great deal of satisfaction and comfort from a pair of leg-holders which he had designed to meet the requirements of operations at the homes of patients, and which pair he had the honor of presenting this evening. The apparatus consisted of the clamps to be screwed to any table, each of which carried an "upright" made telescopic to reduce length in carrying. From the upper ends of the "uprights" the feet were suspended in the manner depicted in the accompanying cut which renders further description unnecessary. The total weight of the apparatus is two and three-quarter pounds, and it packs fifteen inches long for transportation. John Reynders & Co. are the makers.

