

only a very slight flow of bile from the gall-bladder on a couple of occasions.

5. A single large, soft stone from the gall-bladder of a woman aged 55 years. There had been a history of biliary colic, beginning at 15 years of age and continuing for a number of years and then ceasing. Recently she had suffered from severe chills, high fever, and at times a slight jaundice. Cholecystostomy February 15th. No adhesions, and the distended gall-bladder contained, contrary to expectation, only pure bile. Subsequent history was uneventful.

6. A man aged 55, intensely jaundiced and cholæmic, was admitted to the Royal Victoria Hospital with a history of sudden onset of jaundice six weeks previously. Obstruction to the outflow of bile was complete. At the operation, which was extremely difficult on account of the adhesions, the gall-bladder and ducts were found empty, shrunken, and beaded with hard nodules. The gall-bladder was opened and several of these nodules examined. They consisted of hard fibrous tissue (apparently cancerous). The lymphatic glands in the neighbourhood were also enlarged and indicative of cancerous infiltration. On this account the operation of cholecystectomy, which had been contemplated, was abandoned. Recovery from the operation, which was prolonged and difficult, was uninterrupted.

The Diagnosis and Treatment of Septic Infection in Puerperal Cases.

Dr. D. J. EVANS read a paper by this title, which will be published next month.

Dr. A. LAPHORN SMITH thought that the paper was above criticism. Every word in it was true, as far as he knew, and if all the directions were carried out the death rate from puerperal septicæmia would be materially lowered. He then read conclusions which he had embodied in a paper read before the American Gynæcological Society three years ago, which coincided entirely with the views expressed by Dr. Evans.

Dr. F. A. L. LOCKHART wished to lay special stress on one point, and that was the use of antiseptics in midwifery. He thought that even at the present day too many practitioners were either careless or ignorant in this respect, basing his opinion upon a discussion which took place some time ago, in which one speaker stated that he considered antiseptics in the lying-in-room to be injurious, and that he did not always even wash his hands before examining a patient in labour. Another point was in using solutions sufficiently strong to be of service; thus a weak solution of permanganate of potash, which would not stain the tissues, was powerless as a germicide and lulled the