

names as Gooch, Schroder and Playfair are on the side of letting them alone, I think that if the policy of prompt interference is the right one, as I believe it is, it is quite time that some definite law on the subject should be laid down for our guidance.

*Discussion.*—Dr. ARMSTRONG could not entirely agree with Dr. Smith in his method of treatment. He had seen many cases of severe albuminuria accompanied with cedema where convulsions did not follow. After quoting cases where even convulsions supervened, and yet mother and child were carried through, he held that only in the very worst cases should premature labor be induced.

Dr. GURD said he had, within the past couple of weeks, treated two cases of puerperal albuminuria accompanied with uræmic symptoms. The first was a lady who sent for him at the end of the eighth month of her sixth pregnancy, supposing herself to be in labor. The os was found not at all dilated. Twelve hours later, finding the os not dilating, her condition was gone into more fully. The pains were spurious,\* set up each time she micturated, which was about every fifteen or thirty minutes, giving her great agony. She complained of severe headache, thirst, inability to sleep, drowsiness, twitchings, and had vomited several times. Temperature  $102^{\circ}$ . Her feet and ankles had been slightly swollen for about three or four weeks. She was given brisk purgatives, and digitalis infusion and iron with good results. The pains ceased and all the uræmic symptoms abated. The urine was next day passed voluntarily, and in much larger quantities. It contained about eight per cent. of albumen. The following day uræmic symptoms returned. In the afternoon of this day she had what the nurse called a chill, lasting twenty minutes, all her symptoms appearing worse toward evening. She was given a bath after the manner practised in Vienna, and recommended by the Braun, which is as follows; The patient is to be put into a bath of  $99^{\circ}$  temperature, the bath to be covered with a heavy blanket, leaving the face free. The temperature of the water is to be gradually increased to  $100$  or  $112^{\circ}$ . She is to remain in the bath for thirty minutes. A towel wrung out of cold water placed on the head relieves any distressing head sensations. Whilst in the bath the patient is to drink large quantities of water. After coming out of the bath she is to be covered with a warm

sheet and then enveloped in blankets, when almost immediately free perspiration follows. The sweating is allowed to go on for two or three hours. This bath treatment is known often to bring on genuine labor; it did so in this case. Shortly after getting into bed she was taken with good labor pains, and in three hours was delivered of a healthy boy, evidently three or four weeks before time. Patient made a good recovery. Urine, examined three days after delivery, was free from albumen.

The second case was that of an undersized primipara, whom he had accidentally heard was much swollen about the feet, legs and face. On visiting her, she was found very cedematous and suffering from headache, loss of sleep, thirst, very frequent painful micturition, etc. Her urine contained about 30 per cent. of albumen. She had yet two weeks to go. Under purgative and diuretic treatment, with almost exclusive milk diet, all the symptoms passed away. She was now comfortable in every respect. Albumen gradually lessened, till now, ten days after treatment, it was only 12 per cent. \*

Dr. TRENHOLME thought that the condition of the circulatory system had much to do with the prognosis and mode of treatment. In mitral difficulty, or whenever the circulation was otherwise affected, the cases were much more serious. He had frequently seen marked cedema and albuminuria in patients otherwise sound, and no serious trouble followed. He thought that operative measures should not be resorted to if the circulatory organs were sound and the patient otherwise healthy.

*Pathological Specimens*—Dr. WM. GARDNER exhibited the following specimens and related the cases:—

1. *A bottle of fluid removed from a retro-peritoneal cyst of the left loin.* The patient, female, aged 28, unmarried, asserted, and her mother confirmed the statement, that from childhood she had been large in the belly, but that in recent years she had been growing larger and had been suspected to be pregnant. Always well and able to work till a week previous, when she suddenly took ill with rigors, high fever, perspirations,

\* On the 17th she was delivered of twins. At the end of a day's hard labor she had two convulsions, when the forceps were applied for the first child; the second was extracted by the feet. On the 22nd all were doing well.