

months as this is the means of saving very many from eclampsia, because we can at once put them on milk diet and alkalies, which I have found the best. I have tried the hot air baths with much success; in one case the urine was so filled with albumin that it became solid. During convulsions, next to Cæsarean section I consider morphia the best drug. In all my cases I begin with a hypodermic of a $\frac{1}{2}$ gr. morphia. This will not affect the secretions as they are already stopped, and if you can relieve that spasm of the capillaries by morphia there is a chance of the blood getting into the kidneys and the urine getting out. Veratrum viride I used to use in every case until I came to the one of a woman who had almost no pulse when I first saw her, and I did not use it in that case. I am glad to hear of Dr. Little dropping out the chloral, which has killed more eclamptic women than even the accouchement forcé. Chloroform also I am glad to hear him say he gives as sparingly as possible. I remember hearing of women getting chloroform by relays of doctors for 12 hours steadily, when their hearts stopped. The sooner the woman is delivered the better, and that is the key-note of the whole situation; the only way I know of in which this can be done in a minute or two without hurting either the mother or child is by Cæsarean section performed by an expert abdominal surgeon.

A. G. MORPHY, M.D. I would like to ask Dr. Little what method he would advocate in dilating a narrowed, rigid cervix in a 1-para where convulsions had set in before the onset of labour. I gather that the Pomeroy bag could not be used in such a case, and I would like to know if he would advocate the Harrison method with which I have had no experience. I have also a word to say about the examination of urine in cases of pregnancy. I believe, in fact I know, that there have occurred cases of convulsions with fatal termination in which the urine although examined a number of times showed no albumin. In fact I have in mind the case of a colleague of mine who had a patient with a great deal of swelling of the legs and who refused to go to bed and be treated; here the urine was examined a number of times and no albumin found. The woman fell down suddenly in a convulsion while standing up cooking the dinner. My colleague was called and after a great deal of difficulty managed to dilate the cervix and deliver the child, but the woman died three or four hours after delivery.

H. L. REDDY, M.D. I agree with Dr. Little in practically everything he has said; he has handled the question exceedingly well. With regard to the blood letting our French confrères are very fond of it, but personally if the discharge of blood has been very free at the delivery it practically is hardly needed or called for. With regard to treatment, I