

and softened down, the accumulating froth of hydrogen bubbles and debris being removed from time to time by absorbent cotton soaked in boracic solution. When the tip of the fingers could detect no more induration after about three quarters of an hour's action, the strength of current was gradually decreased to zero, the needles withdrawn, the tongue well cleansed with boracic solution, the traction ligature removed and fluid nourishment prescribed, the boracic solution to be applied as required daily.

Reaction was not more marked than might have been expected from the age of the child and the part operated on, nor was the swelling serious, and in about a fortnight the little one was apparently well again, and shortly after was sent to the Infants' Home. Here it was thought that part of the growth had escaped our attention at the preceding operation, and at Dr. Covernton's request I again saw the case with him on May 16th following. On examination the parts were found nicely healed over, with no depression to mark the original site, but a couple of hypertrophied papillæ at the base of the tongue were the cause of the misapprehension. However, to remove all misgivings Dr. Covernton administered chloroform, and the positive electrode having been placed as before, the papillæ were transfixed with a needle attached to the negative side of the battery, and a mild current from three to five milliamperes passed for about twenty minutes, the current gradually turned off, the needle withdrawn and the part treated as before.

The child made a good recovery, and in due course was adopted, and at last account a short time ago was well and happy: no recurrence.

BLACKENING OF THE TEETH BY ANTIPYRINE.—It is asserted that the internal use of antipyrine blackens the teeth; this peculiarity should be generally known by the profession, and also among the laity, that objections may be made on this ground to taking it as a remedy. The blackening is the more intense, the more imperfect the enamel, but may be removed by attrition with dilute acid. The considerable use of antipyrine for several years back, gives importance to this last observation.—*Southern Dental Journal*.

Selections.

ON RECENT PROGRESS IN OBSTETRICS.*

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The treatment of peritonitis in puerperal septicæmia by abdominal section and drainage of the peritoneal cavity has scarcely, I think, yet justified the hopes which were raised at first, or established itself as a procedure likely to have a wide application. Where peritonitis is due to a pre-existing disease of the tubes, it is, indeed, the most rational treatment, and offers the hope of success. But where the septic process begins in the uterus or vagina, and extends in all directions, other tissues beside the peritoneum may be fatally affected. Moreover, we have then to reckon with the increased virulence which microbes appear to acquire in the puerperal woman. And the experience of abdominal section apart from pregnancy appears to show that, if any specially septic contagion is conveyed, even drainage of the peritoneal cavity will not always ensure safety; and that, moreover, in such cases, even a plastic peritonitis may suffice to kill, without any formation of pus. Even if the whole puerperal uterus be removed by hysterectomy, although the primary site of septic absorption is removed, there is the probability that septic foci will have spread to, and will be left behind in the broad ligaments. This operation has indeed been tried in puerperal septicæmia, but not, I believe, with a favourable result; and one can hardly suppose that patients suffering from a fatal form of this disease would be well able to withstand the shock of hysterectomy.

I have only once been tempted to perform abdominal section in puerperal septicæmia. The operation did not save the patient, and the lumps at the side of the uterus—which, it was suspected, might be due to tubal disease—turned out to be cellulitic. The tubes, though inflamed, and doubtless the channel of conduction of the inflammation to the peritoneum, were not dilated or distended, nor did they obviously contain pus.

The treatment of *post-partum* hæmorrhage has

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