

suspected the presence of tape-worm. However, for the purpose above indicated, the mother's bowels were thoroughly evacuated, and, while fasting, she was ordered an emulsion of pumpkin-seeds, which she faithfully took for twenty-four hours, at the end of which time she passed over seventy segments of *tænia*.

This completes the clinical history of a case which throws much doubt upon the present received theories as to the probable and *exclusive* source of *tænia*. That the encysted parasites gain entrance to the stomach and bowels by means of animal food containing the parasitic germs, the experiments of Kùchmeister and others leave no room to doubt. But that they may also gain entrance through the mother to the *fœtus in utero* would appear to be equally well established by the case here reported.—*New York Medical Journal*.

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## Midwifery.

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### THE MODE OF INVESTIGATING THE DISEASES OF WOMEN.

Dr. Robert Barnes, Obstetric Physician, and Lecturer on Midwifery and Diseases of Women and Children, at St. Thomas' Hospital, says in a lecture reported in the *British Medical Journal*: I have now a few general observations to make on the mode of investigating the diseases of women. In a former lecture, I told you that we were guided by the subjective sensations of a woman in our first investigations. When a woman complains of aching and pain in a part, we are naturally led to conclude that there is some mischief going on in the seat of pain, although there is no absolute certainty until we examine the organs suffering. In single women, we are chiefly guided by some disturbance of the function of menstruation. In many cases of disturbed menstruation, there exists some morbid condition which it is necessary to investigate. If there be intense pain and leucorrhœal discharge, we get the indication of disease requiring exploration. Discharges especially are significant, and render examination imperative. No woman suffers long from distressed menstruation or a discharge without danger of mischief. By examination, then, you come to a large class of *objective* signs, which, taken in conjunction with the *subjective* signs, throw great light upon the disease. From the two together, you may come to a rational view of the case.

First, then, as to the ovary. The ovary is recognised now as the *primum mobile*, the first cause of menstruation. When menstrua-