I should like to discuss the operation of vaginal or abdominal Cesarean section, but I have had no experience in connection with either operation for accidental hemorrhage. In the case of either concealed, or combined internal and external accidental hemorrhage, with the patient suffering from shock and a cervix as "hard as iron," any operation would probably be unjustifiable. The shock should be properly treated; and if, in spite of such treatment, the symptoms of shock grow worse instead of better, the patient is probably going to die. If, on the other hand, the patient recovers from the shock, it is certain that in some cases, if not in the majority, serious operation is not advisable. It might happen, however, that internal hemorrhage was taking place into a uterus whose walls were stretching rapidly, and the loss of blood was the chief factor. If, in such an emergency, it was not possible to dilate the os, and deliver soon enough to save life, some form of Cesarean section might be deemed advisable. Naginal section, in one of its varieties, seems the best radical operation in sight; but I am inclined to think its field is exceedingly limited. It seems to me entirely unsuited for such a case as I have reported to-day, especially when there is doubt as to the diagnosis; but it may be indicated in cases where labor is imminent, or present, especially where loss of blood, whether internally or externally, or both, is the serious factor.

I shall now submit to the Fellows of the Association a case reported something like ninety years ago: "A lady of weakly constitution and delicate habit was attacked in the later months of pregnancy with a slight discharge of blood from the vagina, not amounting altogether to half an ounce, accompanied with alarming symptoms of exhaustion and debility. The os uteri was scarcely dilated to the size of a sixpence, and was in such a state of rigidity as precluded the possibility of affording any The lady in consequence died, and, on manual assistance. examination after death, it was found that the separation of the centre of the placenta from the parietes of the uterus had taken place, whilst its edges were completely adherent, forming a kind of cul-de-sac into which blood had been poured, to the amount of a pint and a half, which had become coagulated within the cavity thus formed."

What would you do in such a case as this? Did this woman die from shock, or from loss of blood, or from a combination of the two? I have never met a case where the loss of a pint and a half of blood without other complication caused death; but I must admit that such a hemorrhage is a serious matter.