

of feeling, which I need not dwell upon. Suffice it to say that his misfortunes in this department from puerperal septicaemia were very constant, and also that many who recovered only did so after passing evidently through an attack of septicaemia. It was at once evident to him that his ear trouble, which constantly caused irritation and consequent—often unconscious—scratching for relief, was the obvious cause of much of the puerperal trouble which he related to me. The treatment which we adopted very quickly set matters to rights, and I am glad to say that, though he was obliged to change his practice, he has done exceedingly well in midwifery practice every since. His health also quickly returned. I may add that it is his expressed wish that these notes should appear in this form before the Society.

The second case which I have to report in support of this subject occurred in the practice of a medical friend of mine, and it was the quoting of the above case in conversation to him which suddenly threw light on a case of puerperal fever which ended fatally in his practice the week before. The facts are these: My friend had engaged a qualified assistant, and, being called away, the assistant was sent to an important midwifery engagement some distance off, and all went well until the end of the third day after delivery. Puerperal fever set in, with a rapidly fatal termination. I was asked to examine the assistant, and I found that he suffered from tertiary syphilis, disease of the nasal septum, with a most offensive discharge, and foul breath. He was obviously a danger to any lying-in woman, and I advised that he should be completely rid of his trouble before he again played his part in general practice.

These cases point strongly also to the possibility of nurses suffering from aural or nasal discharges being the media of infection. I have seen three instances of hospital nurses working constantly amongst the most important surgical cases, quite innocent of the fact, until told them, that they were standing dangers to the cases under their charge. In each instance they were removed from active work until the otorrhoea had ceased. I am exceedingly

glad to have been able, as it were, to dovetail this paper into the list of papers before us to-night on antiseptic midwifery, for, however dangerous such conditions may be when occurring in association with general surgery, the increase of danger must be greatly enhanced when in relation to the actively absorbent conditions of the puerperal state.

## THE ETIOLOGY OF PUERPERAL FEVER.

*At a meeting of the Royal Medical and Chirurgical Society, Dr. W. R. Smith read this paper:—*

The inquiry in connection with this subject was, he said, carried out at the Brown Institution at the request of the committee. Blood was obtained from the heart of a patient who had died of puerperal fever, and cultivations made on gelatine in the ordinary way. In the course of two or three days, numerous colonies were present, all clearly of the same organism; this organism was isolated and its growth carefully noted in various media—for example, gelatine, agar-agar, milk, and broth; it was found microscopically to be a micrococcus. Mice inoculated with the organism died in the course of two or three days, and the organism could be recovered from the heart's blood. Inoculations of the ears of rabbits produced in the course of twenty-four hours a diffused redness, not progressive in character, as was the case in erysipelas, such redness disappearing in the course of two or three days. Blood was further obtained from the finger of a woman suffering from puerperal fever, and cultivations made upon the surface and in the depth of gelatine in the usual way; numerous colonies appeared, in all cases resembling those originally cultivated from the blood of the previous patient. These colonies were isolated, and in every respect, both by cultivation and by experiments on animals, resembled the organism previously isolated. From these experiments, etc., the following conclusions were drawn: 1. That this organism occurred in the blood of persons affected with puerperal septicaemia in considerable numbers in the form of strepto-