

my experience has been that it is likely each time to be more serious, and if neglected may end in convulsions. The kidney condition is, as a rule, nothing more than a kidney which has a certain amount of fatty change, with more work thrown upon it than it is able to do, and, as a rule, it returns to its normal condition after labour. I do not believe that the kidney or its deranged function is, as a rule, the cause of convulsions. As to remedies I have found during the convulsion guaiacol of great service. As we all know the pulse and temperature rise considerably as a rule, and I find 20 drops of guaiacol rubbed on the abdomen, and repeated if necessary in half an hour, will, within a very few minutes make the pulse soft, or in other words, bleed the woman into her own veins—the temperature also comes down rapidly. *Veratrum viride* is an uncertain drug. As regards the operative treatment I agree with Dr. Edgar that, practically speaking, when you have a case of convulsions the child should be removed. Deep incisions of the os and cervix are recommended, but I have not personally used them. I have found the Bossi dilator a very excellent instrument in certain cases, it takes at least twenty-five minutes to dilate the os, and if care is not used it is apt to tear the os badly. In one case in which I used it I had a bad tear, but the instrument was not to blame, as I had dilated to the utmost capacity of the instrument without a tear, but there was a very large head, and it was impossible to deliver it without tearing. I certainly feel that the sooner the uterus is emptied the better. Only last week I had a patient who had nine convulsions before entering the hospital and six afterwards, but, as soon as she was delivered, the convulsions ceased.

DR. LAUTERMAN: I have had occasion to examine the available literature on eclampsia during the last year, and it may be interesting to note that in addition to the theories already referred to there is the view advanced by Müller and others, to the effect that eclampsia is a general intoxication derived from micro-organisms in the uterus. It is, however, with reference to a few facts that have occurred in my own experience that I wish more especially to speak. I have been unfortunate enough to have patients develop eclampsia in spite of the most rigid prophylactic measures—milk diet, skimmed milk, and later Von Noorden's modification with cream and vegetables, but have not fared any better until, acting on the suggestion of Oliphant Nicholson, who believes that the chief symptoms of eclampsia are due to what he defines as thyroid inadequacy, I administered iodo-thyrin with the result that in the two cases under observation at the time, there was a large increase in the amount of urea, with a total disappearance of