

hepatic inadequacy, deterioration of the blood, and increase of blood pressure. He gave a resumé into the bibliography of the subject. He dwelt on the element, the lengthened second stage of labor, as an important one in the production of albuminuria, and also upon the failure of the kidneys to secrete within the blood some substance, the absence of which led to the convulsion. In view of this last theory, he suggested as a scientific method of treatment, the administration of the extract of the parenchyma of the kidney of the sheep.

Dr. WEBSTER reported the history of a case which occurred in a woman who was confined at the end of six and a half months. Since that time she had given birth to a child full term without any trouble.

In the second case the labia were swollen to a tremendous size; there was marked œdema; the labia were of an immense size; labor was induced; recovery followed.

In the first case the woman was in perfect health when he saw her at a previous date. She had had two children without difficulty. When called on this occasion the woman did not think she was in labor. But she was vomiting and had severe pain across the epigastrium, and headache. Morphia relieved the condition. A few hours after labor came on. A tonic contraction of the uterus, lasting half an hour, expelled the child before the doctor arrived. He expelled the placenta. A few hours after she had a convulsion, becoming comatose. The breathing was very painful. She had a second fit in the morning, and another on the following evening, when she died. Albumen was present in large quantities in the urine.

Dr. W. J. WILSON said he considered there was a great deal yet to learn about this subject. He had used morphia with good results. The worst cases he had seen had occurred after labor. He called attention to the fact that in certain cases the pupils were contracted instead of dilated. Certain extracts found in albuminous urine were narcotic; others were convulsive, and it seemed in some cases as though the one balanced the other to some extent. Perhaps there was something retained by the kidney which it could not excrete. In regard to treatment, he pointed out the objection to potash salts—how their presence in the blood predisposed to convulsions. The free movement of the bowels would eliminate certain poisons, thus relieving the kidney from this duty. The speaker alluded to the value of diaphoretics and diuretics. He also discussed venesection. He considered the amount eliminated this way to be very small. He discussed also the method of treatment by the inhalation of oxygen.

Dr. DOBIE related the history of a case in which he had used chloroform to mitigate the convulsion, and pilocarpine to produce