

to the hour in which she took the trouble, with the exception of a little headache for a few days previous. The ankles were somewhat cedematous.

The therapeutic measures are chloral, chloroform, bleeding, morphia, purgation, pilocarpine. Her friends stated that two doctors had said on a previous occasion that she was not able to stand chloroform, but it was used in small inhalations. The chloroform was not urged sufficiently to stop the fits which took place about every twenty to forty minutes. Matters grew gradually more serious toward midnight. The uterus had not begun to act before eleven or twelve o'clock. Thirty minims of tinct. ergot was used to stimulate the uterine action then, and also chloral to dilate os. The friends thought it unwise for me alone to use instruments to dilate, for fear of her dying in the proceedings; and may be as well, since some authors depreciate any interference in that way. From twelve o'clock till five o'clock in the morning patient was growing worse, and all present looked for her death at any time. Her pulse ran by degrees up to 165 per minute, temperature 104° and 5, respiration—which was very much labored—55 per minute. Her tongue constantly protruded, and saliva was sprayed forth at every breath. Her neck, which was hard and tense, was about twice the natural size. The lips were purple and the extremities were gradually getting cold. Patient's eyeballs were insensible to light and touch all night, and she was also comatose. During the night, and up to five o'clock in the morning, the convulsions continued, at varying intervals of twenty to forty minutes. Each fit lasted about three minutes. Patient had thirty-five convulsions from beginning to the end. At five o'clock in the morning it was noticed that the os was dilating, which was aided by digital manipulation. The uterus was now firmly contracting. For a time efforts were made to dilate and membranes were ruptured. The feet presented, and soon delivery was complete. Patient had no more convulsions after delivery, and was sensible to handling right away after it. Hæmorrhage was small, and womb contracted well by keeping index finger in the os while a to and fro movement was gently exercised. Pressure with the left hand was kept on the abdomen, and this manipulation of the organ induced contraction, so that the os would grasp the finger as a child would a nipple.

Miss L. A. Davis, M.D., 20 Washington Ave., Toronto, happened to be in the vicinity, and was called in consultation some six hours after delivery. We placed patient under the influence of chloral, 10 to 15 grs. per day, to be continued till better. Patient was kept on milk diet, broths and eggs. It is now one month since patient had first attack, and she is able to work around the house. The kidneys were stimulated some with potash salts and digitalis. Injections, also pulv. glycyrrhizæ co., were used for the bowels. Tonics, with some ergot, were used for a time; chloral constantly, amm. brom. Her temperature and respiration returned to normal in a week, but pulse remained 100 and 110 per minute for much longer time. Her appetite returned shortly to normal.

As to the different theories as to the cause of eclampsia, but one appears clearly in this case—that of the kidneys being interfered with, for there was albumen in abundance in the urine. Does it not seem to be in the nerve mechanism—maybe through the sympathetic system of nerves? How could *pressure* from a pregnant uterus of four months effect the kidneys? At no time was there a suppression of urine in this case.

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#### EXCISION OF KNEE JOINT AND REMOVAL OF NECROSED FEMUR.

BY DR. G. T. ORTON, WINNIPEG.

In the summer of 1890 I was called upon to make an extensive tour of medical inspection of the Indian Reserves on the lakes Winnipeg, Winnipegosis and Manitoba, as well as down the Nelson River, and up the Saskatchewan as far as Cumberland House. Amongst the numerous cases of scrofula in its various forms which constantly came under my notice, I may be permitted to describe one of very considerable interest. It is the case of a little girl, nine years of age, very much reduced by the excruciating pain she suffered, as well as the profuse discharge from numerous sinuses around the knee joint, the result of caries of the articular ends of the femur, tibia and fibula. I decided upon excision of the joint as the only possible means of saving the life and limb of the child, so gave directions for all necessary preparations to be made, including a lounge for her to lie on, some birch bark and willow twigs, with which I deter-