

of involvement of the pyramidal tract as shown by the presence of Babinski's reflex. The paper is illustrated with a plate and diagrams showing the situation of the lesions.

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## OBSTETRICS.

UNDER THE CHARGE OF DRs. CAMERON, EVANS AND LITTLE.

### PELVIC DEFORMITIES.

Under this heading there has appeared in the *Annales de Gynécologie et d'Obstétrique* for September and October, 1907, a very interesting and somewhat extensive analytical review of recent literature appertaining to the subject.

#### CÆSAREAN OPERATION.

The first paper is by Prof. Leopold, "Beitrag zur Sectio Cæsarea auf Grund von 229 Fallen." (*Arch. f. Gyn.* 1907, Bd. LXXXI, Hft. 3.) This is a review of 229 cases of Cæsarean section performed at the Royal Frauen Klinik of Dresden. The review was undertaken to ascertain whether the new operation of Hebotomy would modify the therapeutic procedure in any of the cases. The paper is a mass of statistics and does not lend itself to analysis; 200 of the cases are carefully studied from various standpoints.

In general, it may be said that the conservative operation was performed in 134 instances; while the radical operation (Porro) was followed in 66 cases. In 188 of the cases the indication was pelvic contraction. In 12 other cases the cause was of some other nature, such as tumors, cicatricial contraction of the soft parts, rupture of the uterus, etc.

In the cases of pelvic contraction the indications were relative in 132 instances, and positive in 56. In the total 200 cases the mortality was 7.5 per cent. of the mothers. In 52.9 per cent there was no fever in the puerperal period; 86 infants were born alive, 11 died in the course of delivery or immediately afterwards and 7 died within 3 weeks. Thus 88 per cent. of the infants left the hospital alive.

In the second series of 29 cases 2 mothers died and one child.

Certain cases are then related in detail and conclusions formulated upon them by Leopold. In one of these regarding a woman who had perished from sepsis after Cæsarean operation, he states that, in certain conditions, when all hope of terminating labour by the natural route fails, and the patient is in hospital, hebotomy enables one to deliver the woman with comparative safety to both mother and child. In pri-