

while it is yet in the early embryonic stage? While scientific investigation in the human family has not yet reached a climax along this line, yet we learn from the analogy of comparative anatomy and physiology that a healthy mother, surrounded during gestation by refined and cheerful company, and the best possible environment, cannot fail to produce the most desirable and healthy features in her child both physical, mental and moral.

With regard to the diet of the patient during gestation, and other hygienic treatment, I shall say little, as the same general rules apply as at other times. The bowels should be regulated by laxative foods, mild laxatives, mineral water, etc., and the diet should be nutritious, but not excessive.

Perhaps the most important organs of the whole body to watch at this important period are the liver and kidneys, whose functions in the most healthy are oftentimes prone to be refractory on even slight provocation. Toxæmias of various kinds, with their multitudinous nefarious effects—now well worthy of our suspicion in almost every functional deviation from health—should be doubly doubted in the case of the pregnant woman who manifests any special disturbance of her physiological functions.

Pregnancy is not a disease, but a physiological incident, and can be maintained as such by the observant and ready physician. Let us not wait, then, till serious manifestation of albuminuria are apparent or the blood becomes surcharged with bilirubin or biliverdin, urea or uric acid; but set about without delay by the ordinary eliminative processes, to rid our patient of the waste products retained in the blood.

The principal reasons why our pregnant patient is peculiarly exposed to the dangers of auto-intoxication are that she is exposed to an increase of waste as well as a diminution of excretion. First, her blood contains an increased amount of poison material due to stimulation of the metabolic processes to provide for the nourishment and protection of the fœtus and the tissue-waste passing into her circulation from the fœtus. Secondly, the enlarging uterus may produce reflexly a spasmodic contraction of the blood vessels, and as it enlarges there is a constantly increasing intra-abdominal pressure with a growing liability to mechanical interference with the action of the liver, bowels and kidneys. I need not here enumerate the various symptoms of these toxæmias familiar to you all, but would only emphasize the importance of frequent urinalyses to ascertain the presence or absence of albumen or sugar, and above all, to measure the approximate elimination of urea from a 24 hour sample of urine, which may be deemed a reliable clinical index of elimination. A microscopic examination showing the state