

temperature above the normal point invariably accompanies such an infection.

Among pathogenic bacteria it is not possible at present to distinguish between those which act solely in virtue of their toxic properties, and infectious bacteria which have the property of penetrating into the tissues of the organism. Krönig states that at present the bacteria which may be considered as capable of giving rise to puerperal fever are :—*streptococcus pyogenes puerpalis*, *staphylococcus pyogenes aureus*, *gonococcus Neisser*, *bacterium coli*, *bacillus diphtheriæ*, *diplococcus pneumoniae*, and various bacteria, obligate anaërobes, whose biological properties differ essentially from those of pathogenic bacteria.

While not much is at present known as regards the action of these anaërobic bacteria, the theory that the clinical and marked phenomena of puerperal fever may be caused by the absorption of the products of their nutritive activity (sapraemia), must be questioned. In his opinion, sapraemia without penetration of the bacteria into the tissues, is rare. Recent observations have established that saprophytic anaërobic bacteria may, by their penetration into the tissues, cause the death of a puerperal woman.

We are met with insurmountable difficulties in the endeavour to determine the degree of virulence of the bacteria which give rise to puerperal fever. Experience has demonstrated that, generally, virulence is diminished when the bacterium concerned has remained for some time in a saprophytic state.

Besides a general predisposition to puerperal infection, a local predisposition exists in the case of insufficient hæmostasis in the genital passages, or in the case of extensive lesions of the genital organs. The primary infective process may be situated in the wounds of the perineum, vagina, cervix, and in the whole endometrium; remain localized there, or else spread by continuity, or by metastatic infection. This extension most frequently occurs when the endometrium and the placental site are affected. Rarely, infection arises in infected wounds of the cervix; most rarely, it starts from infected wounds of the vagina and perineum. The blood vessels and lymph canals are almost as often utilised in the propagation of infectious microbes in the organism. The *staphylococcus pyogenes puerperalis* has the greatest tendency to overstep the limits of the primary focus, though the majority of cases of infection by this micro-organism limit themselves to the endometrium, or tend to get well of themselves.

MENGE, who agreed with Krönig as to the bacteria generally concerned in puerperal infection, stated that the infection caused by these bacteria may be heterogenetic or autogenetic. Autogenetic infection,