

sever facial, ligamentous, muscular and osseous structures which prevented the foot from assuming the corrected position. Such operations should be done under strictest asepsis. The doctor related the history of cases which he had treated with gratifying success; photographs illustrative of the condition before and after were presented for inspection.

Dr. OLDRIGHT inquired why the tendo Achillis was cut last—where that step was necessary to correct the equinos. He had cases under observation where the division of the tendo Achillis alone had corrected the deformity.

Dr. HUNTER commended Dr. McKenzie's method of treatment. He pointed out the necessity of hyper correction, and that the instruments used as apparatus for preventing recurrence was not coercive, as those of the instrument-makers were. In the third place it allowed physiological action of the foot.

Dr. McKENZIE, in replying, pointed out that the varus was more easily corrected before the tendo Achillis was severed.

Puerperal Eclampsia.—Dr. SCADDING read a paper on Puerperal Eclampsia.

Case 1. Mrs. E—, aged 23. Confined 23rd of January. Anæmic previous to confinement, with high tension pulse. Delivery natural; no hæmorrhage. An hour and a half after expulsion of placenta she was seized with a convulsion, which he did not have the opportunity of observing. She became unconscious. The pupils were dilated. Morphia was administered. She recovered and there was no return of convulsion. Examination of the urine before confinement was not made; after, the albumen was about one-half by volume. The albumen disappeared entirely.

Case 2. The second case occurred in a woman confined November 3rd, 1895. She suffered from vomiting in the early months of pregnancy, which was relieved by stretching of cervix and application of twenty grains of nitrate of silver. No albumen was found in the urine. During the dilatation of the cervix after the onset of labor, vomiting supervened. Chloroform was given. After the birth of the child, before the expulsion of the placenta, a convulsion took place. After the expulsion of the placenta three other convulsions followed. Chloroform and morphia were administered. While attention was being paid to the fit, an immense internal hæmorrhage took place. On examining the urine withdrawn by catheter, considerable albumen was found, which gradually lessened.

The essayist then entered into a discussion of various theories of the causation of eclampsia, discussing the question of renal inadequacy,