and veins of the brain. The degenerative processes in the brain substance were of the nature of softening and not abscess.

The autopsy findings in the other organs showed that the patient had also suffered from toxæmia of pregnancy. The liver showed numerous focal necroses in the central and mid. zones of the lobules, while in the kidneys there was evidence of a mild parenchymatous nephritis.

DR. H. M. LITTLE. With reference to this specimen of the septicæmia I would say that the patient came into hospital with almost complete suppression of urine and in the eclamptic state. With a view to emptying the uterus a bougie was introduced and labour pains were started. Dilatation was comparatively easy, and she was delivered without much difficulty. She was given large quantities of water with a view to dilute the toxine, and she apparently recovered from the eclampsia. Possibly the abscess in the wall may have been due to the introduction of the bougie, but her temperature was never high. The condition is extremely interesting; it started as a case of eclampsia, from which the patient completely recovered, and later when she was well and sitting up developed this hemiplegia.

A. LAPTHORN SMITH, M.D. Dr. Klotz's specimen of uterus is of interest in that now the view is gradually gaining ground that accouchement forcé is a very dangerous operation, while Cæsarean section has been growing safer and safer until now it has a death rate of only 1 per cent. if done by an expert on women who have not been infected by efforts at delivery. I am only saying this to prepare the mind of the physician to look upon this as the proper thing to do in a dangerous case of eclampsia. The uterus must be emptied as soon as possible, everybody agrees about that; but the former method of treatment by accouchement forcé or with powerful drugs like Chloral Hydrate or Chloroform, which have a high record of deaths on this continent at least, must give way to Cæsarean section, which is so safe that Dr. Barton Cook Hirst told me, about this time last year, that he had performed his seventy-fourth consecutive case without a death. But of course they were done before any injury had occurred to the genital canal. Evidently in the case before us the patient did not die from the eclampsia but from the treatment for that eclampsia; and the sooner that treatment is replaced by Cæsarean section it will be the better for everybody.

1. CARCINOMA OF THE PROSTATE. 2. PRIMARY CARCINOMA OF THE LIVER.

R. P. CAMPBELL, M.D. 1. This specimen was obtained from a patient who had been operated on for hypertrophied prostate by the suprapubic method, and who subsequently came to autopsy when the disease was