confirmed this change in position of the fetus upon this posture being employed. If the head is pocketed in the inlet, he advocates at first the knee-chest posture, followed by the kneeling position. If the head has passed the brim, rotation is greatly favored by the latero-prone posture, the patient lying on the side toward which the occiput should rotate. The kneeling posture has the advantage of being a comfortable one for the patient, and the latero-prone position is also easily taken during the second stage.—*Internat. Med. Mag.*

Omphalotripsy.

Porak (*La Revue Med.*, May 31st, 1899) reports that he has reduced infantile mortality from ten to three per cent. since he has adopted forcipressure in the treatment of the cord instead of the ligature. Umbilical infection is far more prevalent than is generally understood. He uses a wide crushing forceps which flattens out the cord to the skin level. The result is a rapid desiccation.—*Internat. Med. Mag.*

Diet during Pregnancy as a Preventive of Dystocia, and for Determination of Sex.

Schenk, of Vienna, and Prochownick, of Hamburg (Preble, *Internat. Med. Mag.*, July, 1899), have designed systems of diet to be used during pregnancy, one for the object of controlling sex, the other to control size of fetus at term. Schenk is widely known, while Prochownick is almost unheard of. The systems while used for different ends are alike in using highly nitrogenous food.

Schenk's diet is used in the early months, Prochownick's in the late months of pregnancy. Prochownick's object is a practical one, to avoid premature induction of labor in narrow pelves. The idea was by modifying the nutrition of the fetus, labor might go to term, the decrease in weight bringing the pelvis and fetal diameters into something near normal relations. It is not intended as a starvation diet. No food is denied that is essential, but the diet keeps off an excess of weight of liquids and fats in the fetus, present, as a rule, but not absolutely necessary.

Premature induction of labor is generally condemned on account of great mortality to the child. If then P.'s diet solves the problem in a large proportion of cases it should be popularized.

There have been forty-seven cases reported treated by the method (not a mother or child was lost).

P's first attempt was a V-para. The previous four deliveries ended in perforation, version, artificial premature delivery