

Case No. 2, 2,849. Mrs. H. Para. 1, aet. 24. Admitted to hospital in 1904, in labor.

*Personal history.*—Last menstruation ended August 7th, 1902. Has been deserted by her husband under cruel conditions which has had an exceedingly bad effect on her both mentally and bodily.

*Family history.*—Father and brother died from accidents, mother and sisters from childbirth—causes cannot be ascertained.

*Present condition.*—Respiratory, circulatory and genito-urinary systems normal.

*General system.*—Height 4 ft. 6 in., weight 89 lbs. Condition emaciated, on examination. Presentation above brim left occipito-anterior position. Heart 156. Child calculated to be about 5 to 5½ lbs. Mensuration shows a justo minor pelvis of male type. Internal conjugate calculated to be about 7 cm. or 2¾ inches. Vagina unusually small. The ischiatic spines seemed to curl inwards and three fingers introduced into the vagina with difficulty, seemed to show only two inches between them. Os uteri admits only one finger. Membranes intact. Labour had been going on for at least 7 hours severely before entering hospital, the pains being at five minute intervals. On consultation it was decided that the only chance for the child and the best for the mother was section. It was explained to her and she consented. Operation was performed without difficulty, and a child 5 lbs 14 oz. was delivered. During the operation the pulse rose to 120, and although she rallied after operation she gradually sank and died from heart failure on the third day. A post mortem showed abdominal conditions to be perfect. It was undoubtedly death from shock acting on an already poor bodily and mental condition. Child was healthy and survived.

Case 3, No. 3,069, Mrs. S., aet. 28, para. 1. Admitted in the 8th month of pregnancy.

*General history.*—She had mitral and aortic regurgitant murmurs for some years—probably following a severe attack of scarlet fever.

*Family history.*—Nothing of note.

*Present condition.*—Genito-urinary system, nil.

*Respiratory system.*—Great shortness of breath. On examination, chest shows dulness over base of both lungs—on right side being 3½ in., left side 2½ in. and is rapidly increasing, moist rales present in both lungs. Patient unable to breath in recumbent position. Respiration 40 per minute.

*Circulatory system.*—Mitral and aortic regurgitant murmurs. Area of heart dulness slightly increased. Pulse varies from 120 to 140, weak. Compensation failing rapidly.