

unavoidable lacerations of the cervix, or of the risk of infection, which would allow of the passage of a full-term child and permit of a complete restoration of the functions of the cervix. Two methods were available—stretching or cutting of the tissues. The former could be carried out manually, by means of a hydrostatic dilator, by a dilator such as that of Bossi, or by the body of the child. Manual dilatation possessed the advantage of requiring no special apparatus, but there was a danger of slight tears of the cervix and of septic infection. The use of a hydrostatic dilator secured complete dilatation which could be carried out aseptically; it possessed the disadvantage, however, of the likelihood of reclosure of the canal from elastic recoil. Bossi's dilator was a certain method and without danger when the cervix was unfolded, and entailed but slight danger of infection, but the risk of bad tears was considerable, and interference with the third stage of labor was not uncommon. Dilatation by means of the child's body after version was a simple and certain method, but usually entailed the death of the child. Of the cutting operations, superficial incisions were of limited practicability. Vaginal Cesarean section was the easiest of all the methods of dilatation. Dührssen's method was the best; with this procedure injuries of the neighboring structures were not frequent and the maternal mortality was about 1 per cent. The child was usually delivered alive. Vaginal Cesarean section when practised early in eclampsia gave excellent results; 20 cases were recorded, in all of which the fits at once ceased after the performance of the operation. In accidental hemorrhage, if immediate delivery was necessary, vaginal Cesarean section gave good results. In placenta previa all methods of rapid dilatation were best avoided because of the risk of rupture of the cervix. In cases of septic infection also any method likely to produce tears of the cervix should not be practised. In cases where the death of the child was threatened only those operations should be performed which entailed no risk to the life of the mother. Of general conditions, eclampsia, heart failure, impending suffocation from acute lung affections, and at times tumors of the genitalia, stenosis of the cervix, and impending death of the mother, were all indications for the performance of vaginal Cesarean section, which he considered on the whole by far the best of the various methods available for rapid dilatation of the cervix, and for which eclampsia was the strongest and most important indication.