

Ahlfeld wraps his patients in woollen blankets, a broad towel being tied around the body at the level of the elbows, and another at the knees, to secure the coverings. A hypodermic of morphia is given and the patient kept free as possible from all disturbance in a warm, well ventilated room. He reports a mortality of only 6.25 per cent. in a series of 32 cases.

Renal decapsulation has been recently suggested by Edebohls as being of value in the treatment of eclamptic anuria. He reported, eighteen months ago, a case of post partum eclampsia treated by this means. The anuria was overcome, no more convulsions followed the operation and the patient made a good recovery.

Sippel, in April last, making a post mortem section on an eclamptic was impressed by the evident tension of both renal capsules. On slitting up the capsule of both kidneys the renal substance seemed to escape under pressure, while the capsules retracted, the condition being comparable to glaucoma. He suggested, as a result of this observation, the employment of nephrotomy in anuric eclamptic cases, evidently unaware of Edebohls' case.

Recently Edebohls has performed decapsulation two days before delivery and claims a brilliant success. The case was in the 38th week of pregnancy. Twins were diagnosed; but 360 c.c. of urine containing four-tenths per cent. of urea was passed in 24 hours preceding operation. The general condition was grave, and the amaurosis severe. The kidneys were found enlarged, the capsules being loosely wrapped around them, there being no evidence of tension. The kidney surfaces presented a "dirty-grey, turbid, sluggish and stagnant appearance." The operation took but 45 minutes to perform.

For 24 hours after the operation there was complete suppression of urine; then diuresis began, 1,000 c.c. was measured, besides which a large quantity escaped into the bed in the second 24 hours, and the sight greatly improved. Then labour began and was uneventful except for a slight convulsion, and two attacks of twitching. He states that during the four or five days succeeding the delivery there was a "perfect deluge of urine, the quantity of solids and urea contained being simply enormous."

I can find no record of Sippel's suggestion having been acted upon in Germany, but trust that encouraged by Edebohls success, reports of further investigation of the value of this procedure may be forthcoming.

The third point in the treatment of the eclamptic is the important one of dealing with the pregnancy.

The conservative element, as here stated, leaves the case to nature, at least until the os is dilated or easily dilatable, when delivery by