fever, may affect a large number of girls at the same time and injure their kidneys. Years later when these girls marry and become pregnant, they form a group that is more easily affected by the toxemias of pregnancy, and thus give rise to a wave of eclampsia.

Most cases of eclampsia are in primiparae, 80% according to large statistics (Jellett). All the cases I have had in the Western Hospital have been among primiparae. The last three months of pregnancy have the largest number of cases. The disease increases in frequency the nearer term is approached.

Mortality.—Taking the country as a whole, about 25% of the women die. The fetal death rate is very high. It goes over 50%. In our series, in all the cases that had convulsions before admittance to the hospital the fetuses were already dead when the women came under our care. In the post-partum case the child was saved and showed no evidence of the disease.

Etiology.—This condition has been called the "Disease of Theories." I have no knowledge of the chemical composition of the poison which we suppose exists. May I mention in passing a few of the theories that have held sway from time to time.

Predisposing causes are to be found in acute and chronic nephritis, in primiparity, a neurotic temperament, in the long retention of waste products, excessive size of the uterus from hydramnios or multiple pregnancy, or obstructed delivery (Jellett).

Frerich's urea theory, the uremic theory, the auto-intoxication, the infectious theory, the neurotic, the ovular, the anaphylactic and thyroid theories, all have their exponents and opponents. It seems to me that the poison is elaborated in the placenta and gets into the blood stream easily, and is carried throughout the body, affecting the liver, kidneys, brain and heart especially, and in proportion to the concentration of the poison and the ability of the different organs to deal with the toxin. I think that there is a specific eclampsia poison, or group of poisons, probably of protein composition. It is probably a colloid, hence is not readily removed from the circulation by purgation. This may even be produced in a normal pregnancy, but be eliminated, with a minimum of damage, owing to the integrity of the organs dealing with it, and their continual efficient functioning. This real, though unidentified poison does not always give rise to eclampsia, as you know, for