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## THE TREATMENT OF ECLAMPSIA.

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Eclampsia is generally conceded to be a toxemia,—a form of auto-intoxication. As to the source of the toxin there is at present no unanimity of opinion. It is thought by some that the toxin is developed as a result of the failure in function of the maternal organs, the liver, kidneys, thyroid. Others advance the view that the toxin is developed by the fectus, and that eclampsia results from failure of the maternal organs to deal with the excess of waste material. Recently the opinion has gained ground that the placenta is the source of the toxin, either by a specific action of its cells or by defective function.

Dealing with the maternal origin of the toxin Berkley suggests that there are different varieties of eclampsia, just as there are different varieties of puerperal fever, and that a failure of the kidneys, liver, thyroid or intestines to perform their functions properly results in an accumulation of the particular waste products which they customarily deal with, and a consequent general poisoning of the body, so that all the organs are more or less affected, and celampsia results.

Zangemeister's investigations in the Leipzig Clinic to determine the relation between celampsia and the renal function prove fairly conclusively that eclampsia does not depend on changes in the renal secretion, nor is the toxin eliminated by them. Variations in diuresis and in concentration of the urine occurring in the course of an eclamptic attack, indicate that disturbance of renal secretion and convulsions depend on one and the same cause. He points out that a diminution in the excretion of the chlorides is, with the lessened quantity of the urine, the most marked and constant change which the urine undergoes in celampsia. With the cessation of the attacks, increased excretion of the chlorides takes place. From an examination of the blood in these-