were several great difficulties in admitting this as the cause in these cases, as all the patients had been delivered prior to the opening of the body; as the hands were all cleaned with chloride of lime, and the clothes changed, before two of the nationts were visited that night, and as the third was not seen till next day, and as in none was any vaginal examination made by Dr. M. subsequent to the sectio. Dr. M. then submitted what to him appeared, on a careful review of all the cases, as the cause. He believed that there must have been some peculiar condition of A.'s system, which had been not only the cause of the disease discovered in her infant, but also of the sub-equent symptoms in her own case, and which had communicated to Dr. M. some virus or materies morbi, which had been the means of inducing the disease in the other two patients. In support of this, there was: 1st, the state of the infant, which was well grown, and in every way healthy, with the exception of the sero-purulent effusion in the right plears; and that this was dependent on some morbid condition of the mether, was borne out by there being, 21, for some days previous to labour coming on, a feeling of occasional faintness and of distlessness, very fereign to her usual habits -3d, by the difference in the nature of the labour, which on former occasions was generally very rapid, and without premonitory symptoms-whereas, on the present occasion, besides supervening a fortnight before her full period, there was a threatening of labour for four days, during the whole of which time Dr. M. was frequently in attendance on his patient, often for a considerable period at a time; 4th, by the scanty or almost total want of secretion of milk, whereas on all previous occasions it was very abund int; 5th by the rigers, which in attacks of paceperal fever are generally more severe; 6th, by the total want of the usual local pain in the regions of the uterus, its appendages, or the peritoneum; and 7th, the appearances after death. From the preceding facts, Dr. M. inferred that the disease in this case, A, was the result more of some primary morbid stite of the system than connected with any local cause, such as the application of morbid matter to the vagina; that, moreover, this condition had existed prior to delivery, as indicated by the state of the infant, and the symptoms both price and subsequent to delivery; and lastly, that, as he had been in such a close attendance on this patient for four days, he most probably was the means of conveying some infectious matter to B and C, the former of whom was delivered about two hours after he left A.'s house subsequent to her delivery, and the latter on the next day .- Monthly Jour. Med. Sci., July, 1851.

ON THE INDUCTION OF PREMATURE LABOUR.

By Dr. Lehmann, of Amsterdam.

After passing in review the various means of effecting this, Dr. Lehmann gives the preference to that practised by the Dutch accoucheur, Zuydhock, viz., detachment of the membranes by means of a wax bougie. A bougie, nine inches long, and two or three lines in diameter, is passed within the uterus, carried for six or eight inches along its anterior wall, and then at once withdrawn. This detaches the membranes, and directly excites the motor nerves of the uterus; while the prepared sponge, usually employed for this purpose, merely acts upon the sensitive nerves, or the cervix, and affects the uterus itself only by a reflex setion. By remaining within the organ for so long a period, too, the sponge may induce inflammation, which the bougie does not; and from this cause Dr. Lehmann lost two patients in whom he resorted to the sponge.—Rev. Med. Chir.