

Dr. West and Mr. Bowlby, in the Clinical Society's Transactions, Vol. XX., p. 147, report the case of a young girl who passed so much blood with the urine that the bladder was sounded for stone. Nothing further was done, and patient died. The autopsy revealed marked granular kidneys. It is now over six months since I operated on my patient. She has gained in flesh, looks well and is in very excellent health.

NOTES OF A CASE OF INVERSION OF THE UTERUS.

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Mrs. K., aged 20 years, primipara, confined Sept. 28, 1906. Previous and antepartal histories unimportant. She is small and light, with thin bones and little superfluous fat. Pelvis is normal in size and shape.

Labor began about 11 a.m., Sept 27th, but pains were not very strong and were far apart till about 10 p.m.

I was notified at 1.30 a.m. (28th) at which time the membranes ruptured spontaneously. The child presented by the vertex and lay in a left occipito-anterior position. Labor was terminated about 4 a.m. (three and one-half hours after the rupture of the membranes) without forceps, chloroform being used to the obstetrical degree for the last hour.

On delivery, the membranes were found stretched over the head and face, and doubtless had much to do with the production of the inversion. On following down the uterus during the delivery of the body I was struck by a peculiar flatness of the posterior uterine wall, while the whole uterus seemed to lack tone.

About half an hour after birth the placenta was expelled, apparently in a normal manner, some pressure being made from above. As the placenta was expelled, the fundus was felt to pass from the grasp of the hand, and on examination the placenta was found to be adherent to a hard round mass which protruded from the vulva, and which proved to be the inverted fundus. The placenta was easily stripped off the fundus, and on grasping the uterus firmly there was no difficulty in controlling the hemorrhage.

The uterus was carried up into the vagina and its wall fed