possible. In the third group, three women with extreme pelvic contraction, but in whom conditions were present which absolutely excluded the Cæsarean operation. The fourth, consisted of 8 women who entered the hospital in a serious condition, as a result of efforts at delivery outside the klinik. In the fifth group were placed 3 cases suffering from general diseases of a serious nature such as tuberculosis. In the sixth group were 10 cases which are given in detail, the causes being varied. In five at least of these the operation of hebotomy would probably be performed if the cases came under observation to-day, though the rule of the Klinik is "Erst die Mutter und dann das Kind!"

HIGH FORCEPS.

LEISWITU. "Ueber die Gange in der Therapie des engen Beckens zur Rettung des Kindes." Ibid.

Between January 1894 and January 1907 in a total of 27,138 labours in Dresden Klinik, 697 applications of the forceps were made, being a proportion of 2.55 per cent. (a) In the interest of the child, 440 times, 63.13 per cent. (b) In the interest exclusively of the mother, 99 times, being 14.2 per cent. (c) In the interest of both, 158 times, being 22.67 per cent. Thus, the most frequent cause for the application of the forceps was the endeavor to save the child. In the 440 applications to save the infant's life, in but 109 of them was the pelvis normal.

These 440 cases terminated by the forceps with the object of saving the child, resulted in the delivery of 63 dead children, 377 surviving the operation, a total of 85.68 per cent.

In conclusion the author says that high forceps in cases of deformed pelvis permit the delivery of the child with safety, but at the price of considerable damage to the mother.

Thus the principle is still maintained in the Dresden Klinik, that in cases of pelvic contraction the application of forceps is not an operation without danger to the mother, and in general practice its indications should be definitely defined.

Finally he considers that it is necessary, especially in general practice, to proscribe absolutely the high forceps operation and to substitue for it hebotomy, an operation less grave. In certain cases whatever may be the reason, when the physician is unable to perform hebotomy he should not delay to resort to perforation of the living child.

D. J. E.