

kneading, rubbing, and similar means. In the latter, or premature uterine reaction, the uterus is not to be stimulated but soothed; opium and chloroform may be useful, but all oxytocics are to be avoided. Early delivery, if necessary with the forceps, is desirable. A case is given in which the second of these two forms was accurately observed."

MEDICAL EVIDENCE FROM THE STATE OF THE OVUM OR FŒTUS IN CASES OF CRIMINAL ABORTION.

(*The Boston Medical and Surgical Journal*,
January 31, 1878).

Dr. F. W. Draper, in his report on the progress of forensic medicine, gives as follows the conclusions of a committee of the Société de Médecine Légale:

"1. Abortion in the *first* month of pregnancy is always attended with the expulsion of the complete ovum (*en bloc*), and it passes from the woman unperceived by her.

"2. The aborted ovum may, however, in some cases undergo spontaneous rupture during its passage through the neck of the womb.

"3. From the *second* to the *third* month also the ovum may be expelled in a complete condition; but this is not usual, except when the fœtus is dead. When the fœtus is living, it is more common to find that it has undergone rupture. This depends on various conditions, such as the degree of resistance offered by the ovum, the force of the uterine contractions, and the state of the cervix uteri.

"4. The absence of the fœtus does not prove that there has been criminal interference, for if the dead ovum have remained long in the uterus the fœtus or embryo may have disappeared by solution.

"5. Dating from the *third* month it is usual to find the ovum broken up, abortion taking place at two periods, with the discharge of the fœtus followed by that of the placenta.

"6. At the *fourth* month, and subsequently, abortion may be regarded as a delivery on a small scale. At this period it is exceptional that the ovum is found expelled entire.

"7. Up to the third month the cord is too

weak to resist the force required to extract the placenta; and, *a fortiori*, it would not be strong enough to allow an inversion of the parts, as was assumed in the case reported to the Society.

"8. Rupture of the membranes, taken alone, cannot, therefore, be regarded as a sign of intentional abortion, and even if accompanied by an inversion of the membranes it cannot be admitted as sufficient evidence of a criminal act, even in the early stage of pregnancy."—*Phil. Med. Times*.

POST PARTUM HÆMORRHAGE TREATED BY THE INJECTION OF HOT WATER INTO THE UTERUS.—Dr Lombé Attil, in the *Lancet* of February 9th, extols the use of this remedy. He gives notes of 16 cases. The temperature of the water must be from 110° to 115°. The tube of the syringe should be carried fairly into the uterus. He also advocates similar treatment in flooding in miscarriages or abortions.

THE CELL AND PROTOPLASM.—In a lecture recently delivered at the Royal Institution, Professor A. H. Garrod said that he believed the original idea of a cell, as first taught by Schleiden and Schwann, is incorrect. The use of the reagents they employed, to get clearness as they supposed, really brought about artificially those changes which led them to believe that a cell consisted of cell wall, cell contents, nucleus, and nucleolus. He would define as a cell a separate mass of protoplasm, whether surrounded by formed material or not. This formed material comes from the precipitation of salts of lime by the protoplasm and from the formation of hyaline, etc. In this way the tissues of the body are built up. In the growth of the epidermis, the cells are gradually more and more filled with precipitated matter, the protoplasm occupies less and less space, and finally the cells die and are removed from the surface. In fatty tissue, the hydrocarbons of the food are gradually precipitated in the cells till the protoplasm becomes only an investing membrane.—*Philadelphia Med. and Surg. Reporter*.