

organs producing all the lesions and symptoms characteristic of pyemia.

The streptococcus spreads in this way, and all streptococcic infections are very dangerous to life.

The staphylococcus also penetrates deeply into the tissues, but it seldom produces a fatal general systemic infection, usually becoming localized in the pelvis and continuing as a local infection.

The more important natural safeguards in the patient against infection are, first, the epithelial cells lining the genital tract. In the vagina the several layers of flattened epithelial cells lining the mucous membrane make a strong barrier against the entrance of infecting germs into the general system in this part of the genital tract. Higher up in the uterine cavity the epithelial protection forms a less pregnable barrier, there being only a single layer of cuboidal epithelium and this is unavoidably broken through by the separation of placenta and decidua.

Second, another natural safeguard against infection is the acid secretion of vagina, the acidity being the result of the action of Doderleins' bacillus on the normal vaginal secretion. This acid secretion has a destructive action on the streptococcus and other pathogenic germs, so that when vaginal discharge has this normal acid reaction it safeguards the vaginal outlet against the entrance of the most dangerous of pathogenic germs. It does not, we are told, antagonize the gonococcus and colon-bacillus, but these germs are not very dangerous to the life of patient.

Third, another safeguard against the entrance of pathogenic germs into the general circulation is what is known as leukocytosis and the phagocytic action of the leukocytes.

The mortality from puerperal infection (all cases) not actively treated, we are told, is 1 per cent; mortality from streptococcus infection about 5 per cent. The streptococcus infection constitutes about 25 per cent. of all cases of puerperal infection and is the only infection (except in rare instances) attended by a mortality. We are also told that a mixed infection is much more dangerous than a simple infection. The saphrophytes work only in dead tissue and affect the general system only through the absorption of their toxic products.

*Treatment.*—With our present knowledge as to the causation, mode of entrance, natural safeguards and mortality without active treatment, etc., we should be in a position to deduce a few rules of guidance both in prophylactic and curative treatment. Prophylactic treatment is all important, and if proper prophylactic treatment is carried out serious puerperal infection will become almost unknown. By prophylactic treatment I mean the same care in preparation of patient for labor and the