extracted-dead, of course. There was a good deal of post-partum hæmorrhage. The woman died in two days from endometritis and perimetritis, notwithstanding the attendance of a medical man. The. post-mortem examination of both bodies was made ten days afterwards by Dr. Bergwall. He found them in an excellent state of preservation. The remarkable thing was that the feetal lungs floated readily in water even when connected with the heart and thymus. The anterior and upper portions of the lungs were of a bright-red colour, and had an elastic feel, crepitating on pressure. The inferior and posterior portions were of a brownish colour, with a few bright-red spots here and there; these portions presented a firm feel, and did not crepitate on pressure, while pieces cut off from them sank in water. It was therefore evident that some respiration had taken place in utero. No attempts at artificial respiration had been made. Before coming to the conclusion that the lungs contained air during life we should like to be quite certain that there was no putrefaction, seeing the long interval that elapsed hetween death and the post-mortem examination. Dr. Bergwall, for his part, is positive that the aeriform contents of the lungs were not due to putrefaction.

## LEEDS CHIRURGICAL SOCIETY.

At an ordinary meeting held Nov. 2nd, Dr. Spottiswoode Cameron in the chair, Dr. Barrs read a paper on Peripheral Neuritis caused by Septic Infection, with remarks on the sensory disturbances in peripheral neuritis. (The paper will be published in extenso.)

 the uterus and bowel; ovariotomy at tenth week of pregnancy. 4. Strangulated femoral hernis; operated on in third month of pregnancy. 5. Rotation of ovarian tumor in second month of pregnancy causing acute symptoms ; ovariotomy. Mr. Robson attributed the results primarily to the absence of pain and the lessening of shock during the operation by the use of anæsthetics; and secondarily to the entire absence of any wound complication, such as pain, fever, or tension. owing to the strict observance of antiseptic methods. In no case was any sedative required or given, and in all the cases the wound healed by first intention .- Mr. Pridgin Teale had performed ovariotomy four times during pregnancy. All the patients miscarried, and one died. In other operations his experience was favorable.-Dr. Campbell Black asked if there was any particular period of pregnancy at which operations might be most safely conducted. He had an impression that about the sixth month was best .- Mr. Atkinson thought that the period of pregnancy was not of so much importance as the urgency of the condition for which operation was required, and that such cases ought to be looked at all round.

## LOCAL ANÆSTHETIC ACTION OF ANTIPYRIN.

Although antipyrin has been very warmly recommended for the relief of pain by See and others when subcutaneously injected, its administration by this method has not come into general use in this country. See considers that it rivals morphine in the extent of its action, and that it has not the unpleasant after-effects of that drug, since it does not interfere with nutrition nor lead to a "craving." Even by the mouth; antipyrin in ten and fifteen grain doses is used extensively now in this country for all kinds of functional headaches and neuralgia; and it has been found a great adjunct in the treatment of these almost universal ailments. Berdach has lately been using antipyrin hypodermically in Professor Bamberger's clinic in Vienna. He gives the drug in a 50 per cent. solution, in distilled water, and