

no tendency to resolution, the abscess should be opened and contents evacuated; to cause abscess to point, hot vaginal douches may be used.

Dr. G. H. COBURN (Fredericton) endorsed most heartily what Dr. Curry had said. He believed that sometimes there was too hasty expulsion of the placenta, which might account for some of the cases of puerperal septicæmia, through absorption of septic germs. Sometimes puerperal septicæmia does not come on till two or three weeks after confinement, these cases being probably due to a thrombus in the uterine vein. Under favorable conditions this disease should not exist. In the early years of his practice, saw many more cases than at present. He believes *tr. ferri mur.* very valuable in all septic troubles.

Dr. JOHN BERRYMAN (St. John) believed that puerperal septicæmia is set up by something from without getting within. It may not only be through the vagina, but through the lungs and stomach as well. The vaginal secretion is aseptic and also the blood which comes away after the expulsion of the placenta. Some twenty-seven years ago had a number of cases of puerperal septicæmia, but since then only one or two. He finds solutions of creolin very good.

The discussion was adjourned shortly after 4 o'clock, and a visit was paid to the Lunatic Asylum. There the visitors were shown around by Dr. HETHERINGTON, who submitted some cases, and then served an excellent supper. Some of the members, before proceeding to the Asylum, attended the opening of the golf links. The clubhouse seemed the point of attraction to the majority, owing to the presence of the band, and the five o'clock tea, served by the ladies' committee.

EVENING SESSION, JULY 22ND.

Discussion on Puerperal Septicæmia continued.

Dr. E. H. WETMORE (Hampton) mentioned a septic case which did not arise until the twelfth day. He uses the same care in a case of confinement as if he had a wound to treat. He has a small brush for cleansing the hands, a different one for each patient. Finds antiseptic tablets convenient. Uses a solution of 1 to 2000 of bichloride. He gives a preliminary vaginal douche, then a pad or ordinary clean cotton cloths soaked in bichloride applied to the parts. Old syringes should be avoided. Does not douche twice a day, not possible in the country, as there are no reliable nurses.

Dr. T. D. WALKER (St. John) cited a case where different measures had been used, and finally bichloride douching was of benefit. Stimu-