attack she had taken a double dose of these. During the night she had had to rise to attend to one of her children, and in doing so had crossed several times on her bare feet, and in a light dressing-gown, through a passage-way covered with oilcloth, and through which a cool breeze was blowing from a slightly open window. The pains came on suddenly about six hours afterwards. There had been no movement of the bowels. I found her sitting up in bed crying out with sharp lancinating pains. Her features were pale and somewhat pinched. There was slight distension of the abdomen, with great tenderness over all the lower half. The enlarged uterus could be easily felt, but it was difficult to determine whether it was especially the seat of pain, but there appeared to be no special contractions of it. The temperature was 104°; pulse 140, small and weak. On examination per vagina, the os was found soft and closed; little or no shortening of the neck seemed to me to have taken place. I gave her in pretty rapid succession four hypodermics containing each onefourth of a grain morphia, applied hot cataplasms, and ordered an enema containing castor oil and turpentine. My morphine, though pushed during the day, failed to control the pains. Her pulse rapidly failed. That same evening Dr. MacCallum saw her in consultation with me, and confirmed my diagnosis of acute peritonitis, most probably idiopathic. By midnight her pulse was scarcely perceptible; suddenly it improved somewhat, her pains assumed a bearing-down character, and in about twenty minutes a six months foctus was born dead. There was no uterine hemorrhage. Profuse vomiting of grumous matter set in, and she expired very shortly. Both her husband and her mother absolutely declined a post-mortem.

On the 23rd June, 1885, I was called to see Mrs. C., aged 28, advanced to between the fifth and sixth month in her fourth pregnancy. She was naturally of a strong constitution, but had been much depressed during past few months by severe family troubles. She did not admit any previous ailment. Two months previously, to ascertain whether she was pregnant or not, I had made a vaginal examination and detected no tenderness nor periuterine inflammation whatever. On my visit, complaint was