On the evening of November 18th (the sixth day), her temperature, which had been nearly normal all day, rapidly went up to 104° F., when an intra-uterine douche was again used. During the night a uterine douche was used every four or six hours, but the temperature remained from 104° F. to 105° F., and the pulse ranged from 124 to 130. Each time the douche was used a small quantity of fœtid discharge was washed away. An iodoform suppository was gently pushed into the uterus several times after the douche, and on one or two occasions I swabbed the interior of the uterus with Churchill's tincture of jodine. The next morning, November 19th (the seventh day), the temperature still registered 104°F., pulse 130; her distress and sense of impending danger very great, and for the first time there was some abdominal tenderness. After consulting with my partner, Dr. T. K. Holmes, we determined to use the cold bath. The bath tub used is one designed by the janitor of our public General Hospital. It has a perforated false bottom, which, by means of a crank, can be lowered or elevated at will. It also has a shelf which can be extended to the edge of the bed or pushed under the bed clothes. It is a very easy matter, the shelf being extended, the false bottom elevated to the top of the tub, to slide the patient on to the bath and slowly and quietly lower her into the water. The temperature of the water used was 75° F., and she remained in the bath for fifteen minutes, when her temperature fell to 101° F. After the sense of cold and shivering incident upon the immersion passed away, she expressed herself as feeling much relieved, complained of less pain, the tenderness left the abdomen, and her intellect seemed clearer. Besides the reduction of temperature, the pulse fell from 138 to 120, and she soon fell into a peaceful sleep. The temperature fluctuated during the day between $100\frac{2}{5}^{\circ}$ and $102\frac{2}{5}^{\circ}$, running up suddenly at 8 o'clock in the evening to 1042°, when the nurse again gave her a fifteen minute bath, which had the same desirable effect as the first immersion.

During the two following days, Nov. 20th and 21st (the eighth and ninth days) an intra-uterine douche was given every six hours. I substituted for the 1 to 4000 or 6000 corrosive sublimate solution, which I used at first, a 2 per cent. carbolic acid lotion, fearing some ill effect from the mercurial solution if I persisted in its use. With every douche a small quantity of slightly fœtid discharge was expelled. The uterus was freely movable, without any pain or discomfort, and I could easily satisfy myself that it was becoming smaller. Once or twice I used Goodell's dilator, in order to allow of the easy passage of the glass irrigating tube and free drainage. Quinine, iron, and stimulants were given freely. Her stomach bore everything well, and only occasionally, when her temperature was high, did she vomit. There were no symptoms of peritonitis or other