

On the 10th March, 1887, I confined Mrs. F., æt 36. Her labour was easy and rapid, the child was born at 10 a.m. At 4 p.m. I called and found my patient happy and jolly, enquiring how long I wanted to keep her in bed. I had scarcely left the house when she suddenly complained of a most intense pain in the abdomen. She rapidly developed a septic peritonitis, and though I opened and irrigated and examined her abdomen, she died thirty hours after her confinement.

I obtained permission to make an autopsy and then found a small abscess in left fallopian tube which had ruptured, and the escaped pus had undoubtedly set up the fatal peritonitis.

This woman had suffered from an inflammation in the left hypogastrium ten years before. At that time she was ill and under medical care for nearly two years. Her recovery was fair though she never afterwards enjoyed perfect health. She always suffered at her menstrual periods, but recovered sufficiently to become pregnant, probably from the right tube. If her tubes had been removed during her first illness, I think her chances for life would have been greatly increased, and I think probably life is as much desired by the fair sex as by man, and as Dr. J. Price forcibly remarks, women should not be considered altogether as child bearing organisms.

Mrs. D., æt 25, was admitted to the Montreal General Hospital on the 8th May, 1891, complaining of severe pain in lower part of abdomen and incessant vomiting. She was confined eight weeks before admission. Her labour was tedious and completed by forceps. She progressed favourably until the third day when she had three chills followed by a temperature of 102° F. and severe adominal pain. The pain extended through to the back and down the right thigh. She got up on the eleventh day, and again on the twelfth day. On the thirteenth day she felt a soreness in the right side, and on the following day, the pain continuing, she remained in bed that day and the next. On the twenty-third day pain in right side again returned accompanied by vomiting, and a hard lump was felt in right hypogastric region. The history from this date until she was admitted to the hospital was one of pain, chills and profuse sweats. On admission she was pale, anæmic and emaciated; eyes sunken, a pained drawn expression of face, she lays on her back with her knees drawn