D. J. Evans, M.D.—I saw a case in Dresden of a woman who had C sarean section done five times. There are quite a few cases where it has been done several times. A few cases are reported where the uterus has ruptured in subsequent pregnancies, the condition of the hernia just mentioned has also been found. Recently some investigator had recorded the conditions founded in the primary wound; after repeated operation in many instances all trace of the previous uterine incision had disappeared altogether, in others the process has resulted in thinning out of the original wound; it must be in this condition that rupture would easily occur and where hernias can occur. Occasionally in the second operation the placenta has been found at the site of the uterine scar of the first operation. The softening of the scar tissue thus produced has led to rupture in a few instances.

It is early yet to pronounce definitely the limit of the indications for abdominal Casarean section. I am inclined to think that delivery per vias naturales by means of vaginal section or hebotomy, according to its conditions present many advantages over the abdominal route once these operations have been perfected.

F. A. L. LOCKHART, M.D.—I think Dr. Reddy is to be congratulated upon the result of his cases, and upon the fact that he has emphasized the comparative safety of the operation, when it is recognized early, and I hope sincerely that it will lead to a great many more Cæsarean sections being done throughout Canada generally, provided, of course, that they are done with proper surroundings. There is only one criticism, and that is in connexion with the case in which there was a hypertrophy of the cervix. It seems to me that it is better not to open the abdomen in these cases, and if I had had that case I would have been inclined to do the vaginal Casarean section, where one avoids the chance of peritoneal adhesions and consequent obstruction, and the risk of ventral hernia occurring. The case on which Dr. Reddy operated for advanced heart disease is one in which he is to be congratulated for his bravery in undertaking such an exceedingly dangerous task. One case I recall was operated on comparatively early, the disease calling for the operation was myasthenia gravis, in which fhere was a great weakening of all the muscles of the body. Here the abdomen was opened, the fœtus delivered and the result was perfect to both mother and child.

H. L. Reddy, M.D.—Practically speaking it was Dr. England's remarks about this practitioner's work at St. Gabriel de Valois which decided me that if this could be done in a little French-Canadian town, with certainly doubtful aseptic surroundings, and by a man without any