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## Original Contributions.

Certainly it is excellent discipline for an author to feel that he must say all he has to say in the fewest possible words, or his reader it sure to skip them; and in the plainest possible words, or his reader will certainly misunderstand them. Generally, also, a downright act may be told in a plain way; and we want downright facts at present more than anything else.—Ruskin.

## THE CULTURE, DIAGNOSIS, AND SERUM TREATMENT OF PUERPERAL FEVER.

BY GEO. T. M'KEOUGH, M.D., M.R.C.S.ENG., CHATHAM, ONT.

Dr. Haultain read a paper with the above title before the Edinburgh Obstetrical Society (Lancet, June 26th, 1897). He gave detailed accounts of three cases. The first was a primipara where help was needed in the labor by the application of low forceps The puerperium for the first ten days was normal, except that the strength was not regained with the usual rapidity. On the twelfth day she fainted on attempting to rise, and for a fortnight her pulse was quick and temperature about 100°F. On the twenty-sixth day she first complained of severe pain and swelling in the right thigh; this rapidly passed off. Four days afterwards pain occurred in the left thigh and calf, associated with considerable swelling and severe constitutional symptoms, vomiting, sweating and faint-Dr. Haultain then saw her. Pelvic examination revealed nothing abnormal except a subinvoluted uterus and a slight swelling in the left broad ligament. The lochia was a little offensive, and a culture was made of the discharge from the interior of the ervical canal; one was also made from the blood drawn from the