brown, reaction acid, sp. g. 1.013; it contained an unusual quantity of albumen, but no sugar.

At a later examination, numerous granular casts and fatty epithelial cells were found. An enema was first given and then a subcutaneous injection of a two per cent solution of muriate of pilocarpine. This last injection was repeated two hours afterwards, the whole quantity used amounting to 65 minims (or about 1 1/4 gr. pilocarpine). Already five minutes after the first injection the patient was perspiring freely, with abundant secretion of saliva, but the convulsions still recurred with unabated violence and frequency. At half past 7 o'clock, shortly after the second hypodermic injection, the intermissions seemed to become somewhat longer. The os was yet not larger than a silver halfdollar, the general condition commenced growing worse, the coma continuing, the pulse very rapid and barely perceptible, the temperature lowered down to 100.4°, the skin, particularly on the arms, covered with a profuse perspiration, a quantity of sanguineous slime oozing from mouth and nostrils, labored and stertorous breathing, face and hands pale and clammy. Considering the imminent danger, and fearing she might die undelivered, as labor pains were absent, instrumental delivery was resorted to successfully, the child was easily delivered in a few minutes but dead, and another fœtus could be felt in the womb. About ten minutes after this delivery she had another severe convulsion lasting 45 seconds, and the second feetus was delivered, also dead. The placenta was removed about ten minutes afterwards, the womb contracting firmly. The patient was in nearly a collapsed condition, temperature 98.6°. Sulphuric ether was injected into the arm, and this injection repeated two hours afterwards. At midnight she still remained comatose, with stertorous breathing, The skin, however, was everywhere covered with profuse warm perspiration, pulse stronger, temperature 99.5°, no convulsions since delivery. following morning found the patient still comatose, respirations less stertorous; pulse rapid and weak, skin warm and perspiring, temperature 98.6°. A large quantity of urine was removed with the catheter; no change in its composition from the preceding day; uterus well contracted, not over sensitive to pressure, lochia normal. Only towards evening did she commence to show signs of return-Ing consciousness. She drank a small quantity of milk and passed the night quietly. The following morning she was in the full enjoyment of her mental faculties, passed a large quantity of light-colored urine still containing an abundance of albumen, and the odematous swellings had decreased considerably. Twelve days after admittance she left her bed-urine non-albuminous.

M. S., æt. 27, second pregnancy, was admitted September 22nd, 1879, at 7 p.m., unconscious, after repeated severe convulsions. Her first pregnancy ended by abortion in the third month of sestation. Three months ago, while apparently in good health, dropsical swellings appeared, first in

her feet, thence spreading up her limbs, abdomen' face and arms. Although she had, up to the pre sent time, violent desire to void her urine, it had been but scantily excreted after vomiting several She was first seized with convulsions at 6 a.m; they recurred with but short intervals and she became unconscious. Her whole body was œdematous, particularly her face. Coma, breathing stertorous, pulse 140; temperature 105°; pupils contracted; no feetal sound could be heard. The external os would barely admit the finger, head presenting, apparently not at full term, fœtus probably dead, no labor pains, her features cyanosed, sanguineous froth around her mouth, convulsions very violent, and recurring with an interval of 8 to 10 minutes. From 7 to 8½ p.m., she had nine seizures of unusual severity and dura-Very little urine could be obtained by the catheter; it was of acid reaction and loaded with albumen and casts. Prognosis very unfavorable.

Death before delivery probable.

This case was treated exclusively with pilocarpine; no other remedy was used. At half-past eight o'clock an injection of 32 minims of a 2 per cent. solution of pilocarpine was given hypodermically on the anterior surface of the left thigh. Five minutes afterwards the whole surface of body as well as of limbs was covered with profuse perspiration; saliva and slime flowing from mouth and nostrils; pulse 156. She was again seized with another convulsion, followed with but short intervals by many more. Half-past ten o'clock another similar injection was given, causing an unusually profuse perspiration of her whole body, so abundant that it continually ran down her forehead and face guttatim, perfectly bathing her arms and limbs; nevertheless the seizures would recur, but not as severe as before, while the intervals were longer. The respiration, however, became more oppressed. At halfpast eleven o'clock, she was lying deeply comatose, her arms bathed in cold, clammy perspiration, features shrunken, thready and very rapid pulse, temperature in vagina 105°. She appeared to be dying. No labor pains. At half-past one o'clock a third hypodermic injection was given, and 15 minutes afterwards the perspiration was somewhat warmer and she became quieter, so that only light convulsions of her arms could be detected. At half-past seven o'clock on the following morning she was found in labor pains, although still unconscious. By examination it was seen that the head was born and the body came shortly after-The placenta followed immediately, and the womb contracted well. The fœtus was stillborn, the skin peeling off in different places. It had nearly reached full term.

Eleven o'clock, temperature 100.4°, pulse 100 and stronger, skin covered with warm perspiration, patient still comatose, but breathing less stertorously, no convulsions. At 8 o'clock p.m., slight signs of returning consciousness, copious excretion of urine, temperature 101°. After passing the night quietly she woke next morning perfectly