extremely slow, although the patient showed temporary improvement after the injections were begun. Enteroclysis was again practiced, but with very unsatisfactory results.

I had intended to open the posterior cul-de-sac and pack the pelvis with iodoform gauze, but the grave condition of the patient, especially the almost complete cessation of kidney function, appeared to preclude all hope of success attending this procedure. The approximate quantity of urine passed during thirty-six hours had been nineteen ounces.

It then occurred to me that thorough irrigation of the entire abdominal cavity with normal saline solution might accomplish several things: first, remove the collection of serum, which undoubtedly already was infected by streptococci; second, through absorption by the most extensive lymphatic system of the body, the kidneys would be more quickly and radically influenced; and third, the general agglutination of the peritoneal surfaces as a result of the inflammation might, to a certain extent at least, be prevented.

Digitalin, strychnin and whiskey had been injected hypodermatically at intervals since the night before. Several gallons of normal saline solution, prepared according to the formula of Locke, containing sodium chlorid, ʒ iiss; calcium chlorid, gr. 3¾; and potassium chlorid, gr. iss to the quart of sterilized water, was prepared and kept at a temperature approximating 110 F. A four-quart fountain syringe and tube were sterilized by boiling. The patient was given a few whiffs of chloroform, and I made a two-inch incision into the abdominal cavity midway between the umbilicus and pubes. A rubber pad was placed under her to catch the overflow, and the tube of the syringe was inserted through the opening as far as possible into the pelvis.

For one hour the solution was permitted to flow into the cavity without intermission. Several times during this period the patient was turned on her side, and once on her abdomen, and pressure was made on her flanks to facilitate the exit of the fluid. At first, when this was done, the fluid returned was of a yellow tinge and contained many lymph flakes, but later it came away perfectly clear. Twenty minutes after the irrigation was begun ten ounces of urine of a specific gravity of 1,024 was obtained by catheter, and fifteen minutes later, six ounces. At the end of the hour her temperature had dropped to 102.6 F., her pulse rate to 110, she was in a profuse perspiration, and her mental condition had greatly improved. In all, forty ounces of urine had been drawn from the bladder, the last being of a specific gravity of 1,013. Five ounces of whiskey had been given by the mouth. At one time syncope appeared to be imminent, but was averted by raising the foot of the bed to the level of a chair seat.