

procedure was first demonstrated to me something like fifteen years ago by Dr. W. J. Greig, of Toronto, when he was a young general practitioner and I was Professor of Obstetrics; and I am somewhat ashamed to say that I never fully realized the important lesson he taught me until within the last three, or four years. I may say that this is only one of many lessons I have learned from men younger and less experienced than myself, and this perhaps accounts in part for my well-known fondness for "the boys."

It may be considered awkward and expensive to keep the anaesthetist in the house for half to one hour doing nothing. It appears to me that an extra ten dollars may be considered a small matter when compared with the risk of the patient being crippled for life by strong traction and rapid delivery. However, if money must be saved, the accoucheur can help by abstaining from the use of forceps as long as possible with the hope that nature will be able to complete delivery. Of course, it should be understood that the use of forceps must not be too long delayed.

In conclusion, the following summary of the paper may be given:

(1) Chloroform administered to the obstetrical degree seldom produces satisfactory results.

(2) When anaesthesia to the "surgical" degree is required, ether is better than chloroform.

(3) Forceps delivery is far too frequent.

(4) In many or most varieties of forceps now popular, the blades are too heavy, too wide and perhaps too long.

(5) Unduly rapid extraction with forceps is too frequent, and the injuries inflicted because of the rapid methods are serious and lasting.

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### SOME REMARKS ON UNRESOLVED PNEUMONIA.\*

BY JAMES NEWALL, PH.B., M.D., WATFORD, ONT.

**P**NEUMONIA is an acute infectious disease caused by the invasion of the lung by bacteria. The most common one is the diplococcus pneumoniae of Fraenkel. Other micro organisms may, however, cause the disease, such as the pneumococcus of Friedlander, the bacillus typhosus, bacillus influenzae, the staphylococcus, the streptococcus, etc.

The term pneumonia does not imply one, but several forms of pulmonary inflammation, such as fibrinous or true pneumonia, bronchopneumonia, interstitial or fibrous pneumonia. There are other forms of pneumonia which refined diagnosis has shown to exist. The most im-