

There is another useful sign of pregnancy which depends upon the well-known fact that, in the first eight weeks of pregnancy, the principal enlargement of the uterus is in the antero-posterior diameter of its corpus, while the cervix undergoes scarcely any change, except a superficial softening at the external os. The direction of the enlargement of the body of the uterus causes it to project markedly from the cervix, especially in front. The shape of the whole uterus has been likened by Grandin to an old-fashioned fat-bellied jug. This striking relation between the corpus and cervix is readily distinguished by one moderately skillful in making the bimanual examination. A quite characteristic bogginess, softening, and compressibility of the lower uterine segment is also detected. This sensation is brought about by the effects of physiological congestion of pregnancy upon the uterine tissues, and partly, also, by the fluid contents of the uterus.

The condition just described is an almost positive sign of pregnancy, especially if in addition there is marked fullness and pulsation of the vessels on both sides of the pelvis, without evidence of pelvic inflammation, and a more or less distinct purple hue of the vagina. It is reliable as early as the sixth or eighth week.

It would seem, theoretically, that this method of examination has one marked advantage over combined rectal and abdominal examination, for not only can the physical condition of the lower uterine segment and increased mobility of the corpus be made out nearly as well, but the striking jutting out of the corpus over the cervix is much greater in front than behind, and therefore more easily detected through the vagina than through the rectum. Naturally the employment of both methods of examination would give more trustworthy information than either alone. This condition of the lower uterine segment was apparently known to Dr. Rosch as long ago as 1873, but he failed to appreciate fully the subject and only laid stress on the feeling of fluctuation to be obtained by bimanual examination.

DISEASES OF CHILDREN.

Surgical Treatment of Rickets.

In a paper read on this subject by Alexander Ogsten, M.D., C.M., in the section on Diseases of Children of the British Medical Association, and

the discussion which followed it, the remarks made have appeared so remarkable as illustrating how small a part the mere surgical plays in the treatment of the disease, compared with the hygienic part in the hands of the illustrious surgeons who spoke, that we cannot refrain from quoting some of them:

Dr. Carmichael substantially agreed with the opinions already expressed as to anti-hygienic and unfavorable dietetic conditions being the main factors in the causation of rickets. It was no doubt rare to see rachitis in breast-babies; but the poor women who frequented the out-patient hospital room, many of whom were badly fed and whose milk was defective in quality, sometimes had rachitic children. In the artificial feeding of children, as commonly carried out, there could be no doubt that one of the main faults was the deficiency of the fatty element. When cow's milk was simply diluted with water and sugar added, the fat was deficient; in condensed milk, which was largely used, the same nutritive defect obtained. In his opinion, the faults in the system of artificially rearing children were due to ignorance on the part of the public of the real wants of the child as regards a proper substitute for mother's milk. He felt grieved to say that the profession was partly to blame for not sufficiently inculcating the necessity of due attention to the subject. He was glad that the President had alluded to the great need of systematic instruction in medical schools, of the diseases in children and felt sure that the improved education of students in this direction would have good effects. As to treatment, there should be careful attention to diet and hygiene, and avoidance of dyspepsia and indigestion by the use of suitable stomachic remedies. Cod-liver oil he had found useful, but it was generally given in large doses. Phosphorus he thought undoubtedly had a good effect. In those cases where it was not desirable to give it with cod-liver oil he had found a combination with maltine excellent. He would only refer to a method of administration of cod-liver oil not alluded to, that of inunction. He had used it largely with the best results.

Dr. H. Ashby, while agreeing with all that had been said by the President as regards the production of rickets through improper feeding, thought that it should not be forgotten that the infants of weakly mothers, who were brought up on cow's