

nant woman has her urine loaded with albumin, the kidneys are not working properly. It is ridiculous to say that the kidneys have nothing to do with the convulsions which are imminent. Dr. Decotret, director of the largest maternity hospital in Canada, has collected several hundred cases of albumuria of pregnancy, and in no case has eclampsia supervened when the albuminuria was recognized one month before delivery. Although the urine may be loaded with albumin, if the patient is put on a milk diet for a month before delivery, convulsions have not occurred. Acting on this suggestion, I treated a case I had sent me a few months ago in the same way, the albumin cleared up and she had no convulsions. In a case of convulsions I believe that a $\frac{1}{2}$ grain of morphia hypodermically would be the best thing to give. Three cases which I reported each received first a $\frac{1}{2}$ grain of morphine, then 10 minims of veratrum viride, and then an injection of a pint of salt solution, and neither of these cases had convulsions after this treatment was begun. Dr. Decotret employs this treatment in his cases of eclampsia and he has had no deaths in over 50 cases, with the exception of two or three who were comatose when brought in. The $\frac{1}{2}$ grain of morphia will relax the tension to some extent, but the veratrum viride repeated every quarter hour until the pulse falls to forty is the best means of relieving the terrible vascular spasm and allowing the blood to get into the brain and kidneys. Some 30 members of the American Gynæcological Society are strongly in favour of its administration, some giving it until the pulse comes down to 40. Some objection has been made to the morphia on the ground that it dries up the secretion, but as the kidneys are not secreting at all this does not need to be taken into account. With regard to the emptying of the uterus immediately I was at one time in favour of this if the kidneys were likely to suffer permanent damage or ruin, but since I have seen the results of absolute milk diet before, and the morphine and veratrum if convulsions come on, I no longer feel that that is necessary. If the convulsions were not soon stopped, I would be in favour of delivering the woman as soon as possible. I am not in favour of using powerful instruments, and I may say that on speaking to several prominent doctors in Europe, I found that they were all of the opinion that the Bossi dilator was a dangerous instrument. Hydrostatic pressure was more natural and much safer.

DR. SHAW: In mentioning the various theories as to the cause of eclampsia, Dr. Evans omitted to mention one which appeals to me very strongly, I refer to Herz's theory, that the toxins circulating in the blood cause a functional paralysis at first of the liver, and secondarily of the kidney, and also in the spleen, which may account for the non-