

Hemorrhagic infarction of the uterus, the writer adds, only occurs under peculiar conditions, changes in the vessel-walls being most important. The disturbance of the circulation following the occlusion of the uterine arteries, in consequence of emboli, thrombi or ligation, produces a different effect. In general, the uterus is placed under the most favorable anatomical conditions for the rapid and entire restoration of the circulation after ligation of the arteries, so that marked disturbances seldom result therefrom.

THE DECIDUA CIRCUMFLEXA IN TUBAL PREGNANCY.

FRANKEL (*Ibid.*) in an elaborate paper on this subject concludes that at the placental site the tubal wall is greatly thinned, so that often only the subserous connective tissue containing muscular fibres is present. In this tissue are found canals lined with cubical epithelium, the origin of which is unknown. The wall of the tube opposite to the placental site is thickened by a new development of connective tissue between the muscle-fibres. The decidua of the tube consists of two layers, one of pure embryonic tissue, and the other containing decidual cells with connective and smooth muscular tissue. No decidua is found at the point where the ovum is attached. The writer was never able to discover any trace of a decidua circumflexa. The fetal membranes are identical with those in uterine gestation.

THE CURE OF PERITONEAL TUBERCULOSIS BY CÆLIOTOMY.

MANNOTTI and BACIOCHI (*ibid.*) conducted a series of experiments in rabbits and dogs with a view of determining the influence of explorative cœliotomy in tuberculous peritonitis. In rabbits improvement was commonly noted, but never a cure; in dogs a cure was the rule. The tubercles were absorbed and were transformed into connective tissue; the absorption was apparently secondary to destruction of the virus and vascular new-formation, being most marked in dogs. In consequence of the transformation of tubercles into connective tissue troublesome intestinal adhesions are liable to form. It is only by reopening the abdomen that one can determine positively the value of cœliotomy in these cases. Though most of the tubercles are rapidly absorbed, some are slow to disappear, hence it is necessary to be careful in pronouncing a patient as entirely cured, even when the clinical symptoms are favorable. The beneficial effects of cœliotomy do not seem to be more marked when the peritoneal cavity is irrigated with sterilized water or antiseptic solutions. The observers conclude that in animals opening the abdomen causes a certain inflammatory reaction of the peritoneum, accompanied by a marked increase of its absorptive power, which results in a prevention of further infection, degeneration of cells, vascularization of tuberculous nodules, and finally their absorption and transformation into connective tissue.

THE PATHOLOGICAL ANATOMY OF THE FEMALE PELVIC ORGANS IN CHOLERA.

RUSI (*Zeitschrift für Geb. u. Gyn.*, Band. vii., Heft 1) reports the results of his observations on the bodies of sixteen subjects who died of cholera. Macroscopically the uterus was extremely congested, the cavity invariably contain-

ing blood-clots. The endometrium was swollen and of a dark-red color, with numerous ulcers and extravasates. Extravasations of blood were also present in the muscular tissue. The mucosa and muscular layer of the tubes were swollen and congested, the tubes frequently containing purulent fluid. The ovaries were much swollen and contained many extravasates, varying in size from a pea to a hen's egg.

The following appearances were noted on microscopical examination: The uterine capillaries were greatly dilated and filled with blood, extravasations and round-cell infiltrations being often noted. The superficial epithelium of the endometrium was always absent, its place being occupied by a layer of blood-clot. The gland-cells were swollen and granular, the outlines of the cells being obscure; the lumina of the glands were filled with granular debris and blood-clot. The tubes presented an appearance identical microscopically with that of the uterus. The congestion and extravasation of blood in the ovaries was always more marked in the uterus and tubes. The cells of the *membrana granulosa* were granular; the ovum was so swollen as to almost fill the Graafian follicle, which was so granular that the *macula germinativa* could scarcely be seen. In cases that had had a more subacute course, the epithelial cells of the uterus showed more marked degenerative changes, the vessel-walls were thickened and showed hyalin degeneration.

Various cocci and bacillary forms were seen, but Koch's bacillus was not found in any of the specimens.

PÆDIATRICS.

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SEVERE BROMIDE ERUPTION IN AN INFANT.

JONATHAN HUTCHINSON (*Medical Press and Circular*, 1894, vol. cviii, p. 325) records a severe eruption in a child of fourteen months, who had received from two to six grains of bromide of potassium every four hours for three weeks. The eruption consisted of thick tuberous papules on the face and limbs, but not on the trunk. Those on the legs were ulcerated and covered with thick pus crusts.

HYDATID OF THE BRAIN IN A CHILD.

O'HARA (*Intercolonial Quarterly Journal of Medicine and Surgery*, 1894, No. 1) records the case of a boy aged six years, who had been seized a year previously with severe pain in the left side of the head, accompanied by vomiting and giddiness; the pain persisted, and he lost flesh. After a convulsion last-