so dark that no object illuminated by diffused daylight is visible through it. When the injury has occurred, protection of the eyes from great alterations of light, rest from eye-work during the first month, and attention to the general health are indicated. The use of strychnine hypodermatically or galvanism seems to have little support from theory or experience.

TUMORS OF THE OPTIC NERVE.

BRAUNSCHWEIG (*Von Graefe's Archiv*, vol. xxxiv. 4) reports a series of four cases. The most characteristic symptoms are blindness and progressive exophthalmos. Ocular movements remain good; the ophthalmoscope shows neuritis or atrophy; pain and tenderness on pressure are usually absent. The tumors may sometimes be made out on palpation. The treatment is removal, the operation preferred being through the temple with an incision from the upper outer margin of the orbit to the zygoma down to the periosteum, which is raised, and the outer wall of the orbit removed. By this operation the nerve can be examined and removed as far back as the optic foramen, with the least possible danger to the eyeball and the tissues surrounding it. Recurrence of these tumors is infrequent. They are usually classed as myxosarcoma. Braunschweig's patients were otherwise healthy; three of them males and one female, aged from eighteen months to twenty-four years.

OBSTETRICS.

UNDER THE CHARGE OF

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THE DANGER OF INTRA-UTERINE INJECTIONS OF GLYCERIN FOR THE PRODUCTION OF ABORTION.

PFANNENSTIEL in the *Centralblatt für Gynäkologie*, 1894, No. 4, relates his experiences with intra-uterine injections of glycerin for the production of premature labor. He states that when this procedure was first published he admired its boldness, and concluded that the dangers of it were but occasional. His later experience in two cases, the histories of which he gives, has led him to a change of opinion regarding the above method. In the first case, labor was induced on account of advanced albuminuria, after the usual therapeutic means had been tried. Following consultation with his colleague,

Wilke, the author, under all aseptic precautions, injected 100 cms. of chemically pure glycerin between the foetal membranes and uterine wall. In a short time the patient showed symptoms of profound collapse, which, notwithstanding all means of restoration, ended fatally in a few hours, the patient dying undelivered. The autopsy showed death to have been due to nephritis.

In the second case, induction of labor had been attempted by bougies four weeks before term on account of rachitic pelvis combined with stenosis of the os uteri and cervix. The bougies not having the desired result, after consultation 100 cms. of concentrated glycerin were injected. One hour afterward the patient suddenly became cyanotic, and the temperature, which had been 39°, fell to 37° C., rising again to normal.

The urine drawn off by catheter an hour after the injection showed blood, albumin, and casts, and spectroscopic examination demonstrated methæmoglohin with hæmoglohin. In twenty-four hours these abnormal constituents gradually disappeared. The glycerin failed to excite uterine contractions, but a small living child was delivered later by other means. The mother recovered.

The author believes the glycerin in the above cases caused decomposition of the blood, and he agrees with Afanassiew, who found that in dogs glycerin produced hæmoglobinuria, glomerulo-nephritis, and even interstitial nephritis. Although in the first case nephritis undoubtedly existed, it is his opinion that the glycerin injection hastened the fatal termination.

THE INFLUENCE OF CORNUTIN AND ERGOTIN UPON THE COURSE OF LABOR.

KROHL (*Archiv für Gynäkologie*, Band xlv., Heft 1) discusses at length the effects of preparations of ergot upon the uterus during and after labor. He finds that the uterus is favorably influenced by both ergotin and cornutin, but particularly the latter; the diminution in the size of the uterus caused by these agents being most noticeable in the first three days of the puerperal period. In labors, when ergotin or cornutin have been employed, there is apt to occur an expulsion of clots of coagulated blood at an earlier period than when no medicament has been used; and it has also been found that the internal os uteri closes much sooner; this rapid closure being particularly noticeable after the exhibition of cornutin.

The lochin alba is found to appear sooner when cornutin is used than without this means. The pulse undergoes some slowing during the administration of ergotin and cornutin, but no temperature change was noticed, nor was the secretion of milk influenced in any way. These agents distinctly favor uterine involution and diminish considerably the congestion of that organ following labor; besides this, they prevent the collection of great masses of blood in the puerperal uterus, thus preventing decomposition.

As the whole inner surface of the uterus after birth presents a great irregular wound, these remedies by compression prevent the absorption of wound secretions through the lymph spaces. The author does not recommend the employment of ergot in substance, because of its uncertainty of action, but holds in high regard cornutin, or cornutin containing ergotin. Of these