Massage of the Kidney in Renal Colic.—D. C. WOODS (*La Sem. médicale*, 1906, xxiii, 270) reports an instance of renal colic in which he chloroformed the patient and, with the idea of facilitating the descent of the stone through the ureter, applied bimanual massage over this structure. Twenty-four hours later the stone was voided and the pain ceased. Two months later the patient had a similar attack upon the other side which was relieved in the same manner as was the first. The calculus was passed five hours after the massage and forty-eight hours after the commencement of the paroxysm. The author considers that in this mode of treatment we have an effectual mode of shortening the crises of renal colic.

Digalen.—L. VON KETLY (*Therap. Monatschrift*, 1906, No. 6, p. 272) concludes from his results with this drug, which is a soluble form of digitoxin, that when digitalis is indicated this preparation is superior to others. Its advantages over the galenical preparations are as follows: (1) It is always of uniform composition and action. (2) Its action is more rapid. (3) It has no cumulative effect. (4) It causes no gastric irritation. (5) It is most suitable for administration by the mouth in doses of 1/400 to 1/200 of a grain, one to three times a day, in water or syrup. (6) The drug is less applicable to hypodermic administration, since it may cause local irritation and acts no more rapidly than when given by the mouth. (8) In very severe instances of cardiac disease it may be administered intravenously. The action of the drug takes place in from three to six hours, diuresis is induced within twenty-four hours, and the effect persists for from one to two days.

OBSTETRICS.

UNDER THE CHARGE OF

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Infection in Septic Abortion.—SEEGERT (*Zeit. f. Geb. u. Gyn.*, 1906, Band lvii, H. 3) contributes a paper upon this subject from Olshausen's clinic in Berlin. In 15,000 cases of abortion fever occurred in 15 per cent. Of 633 patients, 182 had chills before they came under active treatment. Among the 15,000 patients were 450 who were severely infected; of these 94 died. In 82 cases autopsy was made. Those cases showed the most severe symptoms in which the longest time elapsed before the uterus was completely emptied. Fever often ceased when the uterine contents were expelled. These were cases of pure sapremia, in which the bacilli present were only mildly infective. It is of the utmost importance that no artificial wound be made in the lining membrane of the uterus. In these cases, neither incision nor forcible dilatation should be practised, but if necessary the cervix should be tamponed with gauze until the uterus is sufficiently open to permit the removal of its contents with the finger. No sharp instrument should