

a healthy child being born at full term. On examination the tumor was a dermoid cyst of the ovary with strangulated pedicle and a partial strangulation of the Fallopian tube. The article concludes with a review of the literature of the subject.

Artificial Reproduction of the Amniotic Liquid during Labor.—SCHALL-LEHN (*Archiv f. Gynäk.*, 1909, lxxxix, Heft 2) reports five cases of premature escape of the amniotic liquid, in which Bauer's elastic bag was introduced, distended with salt solution, and allowed to remain in place in the membranes. In several cases in which the heart sounds had become weakened through birth pressure they improved after the bag was introduced. If the patient suffered much pain from pressure, morphine was given hypodermically, and the patient was delivered so soon as the cervix was dilated by version or forceps. The presence of the bag seemed to excite uterine contractions and lessen the risk of fatal birth pressure for the child. It was used in these cases, not primarily to dilate the cervix, but to protect the child from pressure; secondarily to soften the cervix and expedite labor.

The Results of Pregnancy Occurring After Operations for the Correction of Retroflexion.—BIRNBAUM (*Archiv f. Gynäk.*, 1909, lxxxix, Heft 2) reports the results in 20 cases operated upon for retroflexion by ventrofixation. In 4 of these pregnancy occurred, terminating in labor without complications. In these cases there were evidences of peritoneal adhesions and alterations of the tubes and ovaries. These were detected at the operation. The cause of the sterility which had existed before operation seemed to be the kinking in the Fallopian tubes, which was caused by the retroflexed condition of the uterus. In 3 cases no cause could be found at operation for the peritoneal adhesions; in 1 case a previous parametritis had undoubtedly existed. In the 16 other cases in which operation was done for retroflexion, pregnancy had not occurred at the time of writing. It is questionable whether lesions indirectly produced by the retroflexion were not responsible for the sterility in these cases.

GYNECOLOGY.

UNDER THE CHARGE OF

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An Ovarian Abscess Containing a Lumbricoid Worm.—FRY (*Jour. Amer. Med. Assoc.*, 1909, liii, 1028) reports a case of ovarian abscess that contained a lumbricoid worm. The patient was twenty-three years of age. The right appendage was inflamed and adherent. The left ovary and tube were adherent to the uterine cornu. The ovary was enlarged to the size of a hen's egg, the surface smooth and