

ing she was taken with unconsciousness and convulsions, brought to the medical Clinic with fever, albumin in the urine, casts and indican, with severe convulsions and spasm. Death speedily followed. Autopsy showed diphtheritic endometritis with thrombosis of both spermatic vessels, the heart muscle degenerated, the liver altered and hemorrhage into the substance of the kidneys. The writer draws attention to the many theories advanced to explain this condition, and inclines to consider it as toxic. In the matter of prognosis, each case must be studied individually, and the entire collection of symptoms critically reviewed.

**The Biologic Test for Pregnancy.**—PUPPEL (*Monatschrift. f. Geb. u. Gyn.*, Band 39, Heft 6, 1914) in 27 samples of blood from pregnant patients made 32 tests. In 16 the specimen came from a pregnant patient and of these 12 by first test gave a positive result. Several cases of pregnancy or abortion first gave a negative response, followed shortly by positive. In several cases some fault of the apparatus or inaccuracy in the technique was found. In 2 cases of the non-pregnant a positive result was followed later by a negative, and in 1 case of positive pregnancy a negative result persisted. In a case of abortion between the second and third month, where the uterus was cleared, a negative result was obtained two days after the treatment. A case of gonorrhœa, 1 of two tuberculous pyosalpinx, 1 of amenorrhœa after puerperal sepsis and one of beginning menopause gave negative results. He ascribes variations and failures to faults in technique rather than to an essential lack in the method.

**Recovery After Shotgun Wound of the Abdomen and Pregnant Uterus.**

—DAVIS (*Amer. Med. Assoc.*, July 18, 1914), reports from the Massachusetts General Hospital of Boston, a case of an Italian woman, four months pregnant, admitted to Hospital about thirty minutes after receiving a shotgun wound of the abdomen at close range. On admission there was an irregular lacerated wound in the right lower abdominal quadrant. Two fists could be introduced into the abdominal cavity. Through this were protruding about four feet of small intestine. There was considerable oozing of blood. In the right groin about two inches below Poupart's ligament were two small punctured wounds. No powder burns nor wounds of exit could be found. There was no vaginal hemorrhage; the patient was shocked but the pulse and temperature were normal. Sterile towels wet with hot salt solution were immediately placed over the intestines. Morphine,  $\frac{1}{4}$  gr. and camphorated oil 30 mm. were given hypodermically, and one pint of normal salt solution injected under the right breast. At operation about 40 small perforations were found in the protruding bowel and in some places the shot could be palpated in the wall of the bowel. Through some of the perforations exuded gas and frothy fecal matter. The perforations were infolded with purse-string sutures of silk, several being included in one suture in many instances. At one point this caused constriction of the lumen of the bowel, but gas could be squeezed through. The intestines were carefully washed with warm salt solution and replaced. Considerable blood was found in the abdomen. The uterus showed a tear four inches long in the anterior wall, through