

Remarks.—From the comparative rarity of pulmonary abscess I was in some doubts at first as to the real nature of the case. Subsequent events, however, and the decided change in the physical signs of the left lung, left no doubt that it was an abscess. The treatment adopted after its bursting, chiefly aimed at supporting the strength and correcting the foetus of the sputa.

RARE FORM OF FŒTAL DEFORMITY.

By W. V. JAKINS, L.R.C.P., L.M. Ed., Fell. Obst. Soc. Lond.

Last month I was called into the country to a primipara, aged about twenty years. I saw her at 9.20 p.m. She had been in mild labour from the morning, and a leg had been external since 6 p.m. On examination I found the left heel presenting with the leg to the knee external. The pains were slight. With gentle traction I delivered her in ten minutes. While so doing, when passing my finger along the child's abdomen, I came to an irregular mass, to the touch somewhat like a bunch of hæmorrhoids. After delivery I found a bloodless rent from the umbilicus to the ensiform cartilage; on each side of the rent were thin seams, as if the skin had been overstretched. Just below the umbilicus ran a fine film of membrane, increasing in thickness as it went upwards. This completely enveloped the parts above, and it contained a little fluid. On rupturing it, I was enabled to examine the body. It was that of an eight months' female child. Through the bottom of the rent protruded some small intestine and the transverse colon; on the left side, curling up over the ribs, was the whole of the liver; on the right, the heart, in the pericardium. Death had occurred probably within forty-eight hours. The mother declared she had felt the movements of the child the night previously. There were neither blood-stains, nor signs of meconium. The placenta was softened and pale in patches; it came away readily.

The patient was a tall, slight, well-made woman, of active habits. She had had no accident nor fright. She made a quick recovery.

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