

be paid to the Treasurer of the Association; and if not paid at the annual meeting, they should be remitted by mail to him (Rich. J. Duglison, M.D., Lock Box 1274, Philadelphia, Pa.). If members fail to pay their dues for three years in succession, after due notice from the Secretary, they lose their membership. And if a member fails to pay his dues for one or two years, he cannot retain his membership by simply paying the dues for the *third* year; but the arrearages for all the years must be paid. We call attention to this, because the Association took direct action on the subject at its recent meeting, and left no discretion with the Treasurer in relation to the construction of the rules relating to the subject. We wish to call special attention, also, to the fact that under the new constitutional provision for admitting members by *application*, the application should be made in writing, directed to "the Treasurer of the Association," and accompanied by the membership fee, five dollars, and by a certificate of good standing as a member of the State or local Medical Society where the applicant lives, signed by the President and Secretary of such Society. Only subscribers to the *JOURNAL* who are not members of the Association, and advertisers, should remit money to the publication office, 65 Randolph street, Chicago, Ill.

**SCARLATINA IN UTERO.**—In an interesting paper read before the New York County Medical Association, April 21, 1884, Dr. Charles A. Leale relates a well marked case of scarlet fever in a child at birth. The mother was attacked with the disease at the end of the ninth month of pregnancy. Labor was induced when she was in the early part of the eruptive stage of the fever. The child was readily delivered with the forceps, and "was unmistakably in the midst of the eruptive period simultaneously with its mother."<sup>1</sup>

The disease proved highly malignant in the mother, causing her death fifty-six hours after her delivery. The child recovered. Such cases are very seldom met with, although a few are on record.

**EPIDEMICS OF CHOLERA AND YELLOW FEVER.**—Reports show that up to April 12, 1884, the cholera had been on the increase in Calcutta, while yellow fever prevails only very moderately in Rio de Janeiro, Havana and some other places within its native limits.

Whether either of these dreaded scourges will extend beyond their ordinary limits during the present summer remains to be seen. The health author-

ities in the South and Southwestern States are taking active measures to prevent any invasion of those States.

**LONG ISLAND COLLEGE HOSPITAL.**—At the annual commencement of this college, held May 21, 1884, the degree of M.D. was conferred upon 44 candidates.

## SOCIETY PROCEEDINGS.

### CHICAGO MEDICAL SOCIETY.

The semi-monthly meeting of this Society was held on the evening of May 5, 1884, when two important papers were read. The first being on "Puerperal Septicæmia and Prophylaxis of Puerperal Inflammations," which was ably presented by Dr. G. Frank Lydston, wherein he differed from many eminent writers on these subjects. The paper is some 70 odd pages in length, written on legal cap, and consumed the greater part of the evening's session. Below will be found a brief synopsis. After reviewing with some vigor the discussion of "Puerperal Fever," in a New York journal, and that of the New York County Medical Society, and the admirable essays upon the subject by Drs. Thomas and Garrigues, the writer asks, What is puerperal fever? To define this, he stated, is a most difficult problem. Referring to the descriptions of Leishmans, Hervieux and Lusk, how widely different are their definitions, made at intervals extending over a period of years. Barker states that puerperal fever is an entity. To assume that diseases which may occur from numerous and most diverse causes in the non-puerperal female should change and become suddenly "specific" is illogical.

The writer did not, however, wish to be understood as advancing any arguments in favor of ignoring the danger of septicæmia, but simply offering a protest against what he was pleased to term the "septophobia" prevalent in some quarters. In other words, defined his position as midway between the two extremes of practice. Through the medium of the placenta, there is a constant interchange of nutritive and waste materials between the vascular systems of the mother and child. The former is far in excess of the latter, and is a physiological necessity. In this process of osmosis, the fluids are chiefly towards the child. At birth, however, all this is changed, and the osmosis is in the direction towards the maternal circulation. The afferent current is checked, and the lymphatics and veins of the mother are more active than ever, as it is mainly through them that the retrograde metamorphosis of tissue occurs, and which is the essence of physiological uterine involution. Or, as is described later in the paper, the function of the lymphatics and veins of the puerperal woman, is to remove those nutritive materials which by the removal of the foetus have been rendered unnecessary. That a large amount of waste

<sup>1</sup> MEDICAL NEWS of May 31, 1884.