ART. XVI.—*Proceedings of the Clinico-Pathological Society of Washington, D. C.*

1866. June 9. *Case of Sudden Delivery while at Stool.*—Dr. H. A. ROBBINS reported the following example of this:—

Mrs. —, wife of a soldier, arrived at Armory Square Hospital, on the eve of the 1st of June, 1863, after travelling day and night from the northern part of the State of New York. During the night Mrs. — visited the water-closet, when the pangs of labour came upon her, and before she could arise from the position she was in, the whole contents of the uterus had disappeared through the opening in the seat. Upon our arrival at the place, we could distinctly hear the cries of an infant in the drum, five feet below the surface of the earth. In the course of a few minutes the child was extracted from its filthy surroundings, and, much to our astonishment, the placenta and cord were found attached to it. The infant was a well-developed male child, weighing eight pounds. The mother was a small woman, with rather an unnaturally large, rigid pelvis. The hemorrhage was easily checked by cold applications. Mrs. — had given birth to two children prior to the birth of the one just reported; she stated that she had but little pain, and the deliveries were soon over.

June 23. *Incised Wounds.*—The following cases were reported by Dr. S. J. TODD as evidence of the inefficacy of the persulphate of iron as a styptic in arterial hemorrhage:—

CASE I. On the afternoon of June 11, 1866, I was called to see Wm. O'B., æt. 15, apprenticed to a coachmaker, who had sat down upon a crescent-shaped knife—used in this business to trim leather—wounding himself in the gluteal region. The messenger informed me that the hemorrhage had been very profuse, but had been arrested. On examination I found the injured part bandaged with coarse canvas, smeared with varnish, the blood dripping underneath, instead of soaking through. This being removed showed the wound which was half an inch in length and about two inches deep, immediately behind the left hip-joint. As the hemorrhage, which was from the bottom of the wound, was not controlled by ice and exposure to the air, the wound was plugged with lint saturated with sol. ferri persulph., and a firm compress and roller applied. The boy was placed in a wagon and sent to his home, where I visited him two hours afterwards with Dr. N. S. Lincoln. The bleeding continued, welling up between the plug and the wound, and hoping to secure the cut vessel, the wound was enlarged. The hemorrhage seemed to come from one of the small arteries about the articulation of the hip-joint; but our efforts to ligate it were unsuccessful, owing to its having retracted beneath the muscles, and to the insufficient light. As the bleeding ceased by direct pressure on the head of the bone, the wound was again plugged with lint and the styptic and the pressure maintained by compresses and bandaging.

12th. 9 A. M. Bandage soiled and clotted from an oozing which had occurred two or three times during the night. Perfect quiet was enjoined and the dressing left undisturbed.

5 P. M. Hemorrhage had recurred several times during the day, but had ceased spontaneously.

13th. Bleeding continuing, it was decided in consultation to remove the

dressing and enlarge the wound again, when the hemorrhage was found as copious as at first. In our efforts to ligate the vessel it was torn and lacerated and the hemorrhage ceased; a small artery, probably the distal extremity of the one wounded, from which there was some bleeding, was tied. The wound was left open and healed rapidly, water-dressings only being used. There was no recurrence of the hemorrhage.

CASE II. On the 21st August, 1864, I was called to Daniel W., æt. 16, who, two days before, had trodden upon a broken bottle and wounded the vessels of the sole of the foot. The wound had been dressed, but hemorrhage having recurred several times, I was sent for. Removing the dressing, I attempted to tie the cut ends of the artery, but the vessel had retracted beneath the muscles and fasciæ and could not be reached. I plugged the wound with lint and the persulphate of iron, and applied compresses and a roller. I was called twice the same day to arrest the bleeding, and, at the last visit, determined to ligate the posterior tibial, as the hemorrhage was from the plantar arch, and to apply a compress over the anterior tibial to prevent bleeding from the distal extremity of the cut vessel. This was done, and there was no recurrence of the hemorrhage.

CASE III. In September, 1864, I was called by a porter in a wine store who had cut the superficial palmar arch while bottling wine. As in the preceding case the artery had retracted and the wound was dressed with lint and the persulphate of iron and firmly bandaged, but with the same result as in the two cases just reported. In two hours I was again called, and took with me a medical friend who failed, as I had, to ligate the arteries in situ. We then cut down upon and tied the ulnar and placed a compress over the radial which entirely arrested the hemorrhage. Both wounds healed rapidly, and there was no recurrence of the bleeding.

October 6. *Case of Hydatids in Utero.*—Dr. C. M. FORD reported the following case:—

Mrs. S., mulatto, æt. 42 years, weight 200 pounds; plethoric; mother of thirteen children, of which nine are living. Menstruated regularly until November 1st, 1864, when suppression of the catamenia took place followed by enlargement of the breasts, morning sickness, and the accompanying signs of pregnancy.

February 1, 1865. Was called to see her, when she presented the following symptoms: Complained of constant nausea, faintness, and great exhaustion; sense of weight across the chest; palpitation of the heart; and dragging pains in the back, extending down the thighs. Pulse 100, weak and wiry; loss of appetite; tongue pale, but clean. Above the pubis could be felt a circumscribed swelling of the size of a pregnant uterus at about the term of five months. On making a vaginal examination, the os uteri was found to be slightly patulous, sufficiently so to admit of the index finger—both lips being indurated with a cartilaginous feel. Had been confined to her bed for the two weeks previous, suffering during that time from three discharges of bloody serum, and on the morning of my visit had a profuse discharge of the same character as the previous ones, except that it was but slightly tinged with blood. Ordered perfect rest, cooling drinks, light covering, and attention to diet; also, R.—Acid. sulph. dil. gtt. xx, every three hours; and, to relieve the excessive nausea, R.—Cerii oxal. gr. iij, morning and evening.

15th. Did well under treatment up to this date, when a profuse dis-