

In simple fractures of the lower extremities a patient may almost at once be up on crutches, and not only the tiresome confinement of weeks in bed is avoided, but a better nutrition of the injured limb is thus secured. When removal is desired it is perhaps best accomplished by Seutin's scissors variously modified, but the bandage is quite easily divided with any strong, sharp knife, by cutting obliquely through to the wadding and removing it like a shell from the inclosed limb.

I should fail of doing justice to myself or the subject, did I close without making reference to one of the latest applications of the plastic bandage to angular curvature of the spine, by Dr. Sayre, of New York. I would earnestly request all interested in the treatment of this class of unfortunate sufferers to make themselves familiar with Dr. Sayre's publications upon this subject, as one of the most valuable contributions to modern surgery.

I have now treated a considerable number of patients by this method, with most satisfactory results; and believe were Dr. Sayre known for no other service, his name would descend to coming generations as a benefactor to his race.

THE OBSTETRIC BAG.¹

BY GEORGE E. FRANCIS, M. D.

PROFESSOR PLAYFAIR, in his lately published Treatise on Midwifery, gives this excellent advice: "The practitioner should always be provided with the articles he may require." "Every one can manufacture an excellent obstetric bag for himself, at a small expense, by having compartments for holding bottles stitched on to the sides of an ordinary leather bag, such as is sold for a few shillings at any portmanteau-maker's. It is a great comfort to have at hand all that may be required, and the bag should contain chloroform, chloral, laudanum, the liquor ferri perchloridi of the Pharmacopœia, and the liquid extract of ergot. If it also contain a Higginson's syringe, a small elastic catheter, a good pair of forceps, and one or two suture needles, with some silver wire, the practitioner is provided against any ordinary contingency. Other articles that may be required, such as thread, scissors, and the like, are generally provided by the nurse or patient."

Having for some years been in the habit of taking such a bag with me whenever called to a case of labor, I wish to bear witness to the comfort it affords, to make some comments upon its list of contents, and to propose a few additions which I have found useful.

The chloral is most conveniently carried in aqueous solution, each minim containing a grain. This is cleanly to handle, easy to measure,

¹ Read before the Worcester District Medical Society, March 14, 1877.

and will not decompose. It is used as an anæsthetic during the first stage of labor chiefly, and in my opinion is best administered by the rectum, for it is a nauseous drug to swallow, and is not always retained by the stomach, while forty grains in an ounce of warm water gently injected into the rectum give very little annoyance. Women are often suspicious of any dose which they are told to swallow, especially in the early part of labor, lest it should hurt the baby or do other mysterious harm; but an injection for the declared purpose of softening and relaxing the parts and soothing the pains is rarely objected to. Several times after using chloral in this way to relieve the agony which attends the dilatation of the os, in the first labor of a sensitive woman, I have been surprised by the sudden and unexpected relaxation of the os and the rapid descent of the child, and I now never venture to leave the patient after chloral has been given till labor is completed.

I carry in my obstetric bag, besides the articles mentioned in Professor Playfair's list, some appliances for caring for the umbilical cord and for preserving cleanliness. The cord has to be severed at a moment when the mother needs the closest attention to guard against hæmorrhage, and to secure celerity I find it well worth while to carry special scissors and tying material; the blades of the former have round ends, to avoid harming the baby; for the ligature I have found nothing better than the round, soft, braided cotton, sold for corset-lacings. In the details of midwifery practice there is nothing which adds more to the comfort and to the reputation of the practitioner than cleanliness. If the woman and the bed can be kept clean and dry during the labor, at its close she needs very little handling, and can take her well-earned rest at once; meanwhile the nurse is in good humor, and the doctor feels himself fit to return to civilized life.

The basin I use most frequently measures twelve and a half, six and a half, and two and one half inches, in length, width, and depth, weighs ten ounces, and may seem larger than is necessary; but I feel well repaid for the possible annoyance of extra weight and bulk by feeling prepared for the deluge that now and then comes. This basin serves to catch the liquor amnii, when the membranes are ruptured, either naturally or by the use of a blunt point; it receives the fæces and urine which are sometimes forced out in spite of all precautions; its shallowness allows the child's head and body to pass over it, while the attendant gush of mingled filth is prevented from reaching the bed, and finally it catches the placenta and the clots which may be forced out with it. I have often found the bed to be absolutely dry at the end of labor; but with much less perfect success the difference in comfort which the use of a basin makes is simply astonishing. One or two trials with an ordinary shallow hand-basin will convince the most skeptical that this novelty is a real improvement.