The circumstances of the death of Baron Cuvier we shall append in some detail. His funeral honors were performed with unusual magnificence. They were attended by not less than between four and five thousand persons, including all those who were of any literary or scientific pretensions in Paris; and the orations pronounced over him, by the representatives of the different learned societies with which he was connected, were remarkable for their number and impressive eloquence. Their theme could not have been a more fertile one; for their illustrious subject was universally admitted to have been guided in his great career by nothing but the pure love of knowledge, and the ardent desire to benefit his race. His labors, in a word, will merit the gratitude and command the admiration of posterity.—*Medical Gazette*.

[An interesting account of the last sickness and of the death of Baron Cuvier will be given in a future number.]

SPONTANEOUS EVOLUTON OF THE FŒTUS IN UTERO.

Case of Spontaneous Evolution of the Fœtus in Utero, after the Liquor Amnii had been discharged, and the Uterus contracted. By SILAS JAMES, M.D.

[Communicated for the Boston Medical and Surgical Journal.]

THE term spontaneous, as here used, was first employed by Denman, for expressing the series of effects terminating in an evolution of the child, wholly independent of the practitioner, and it is now employed by all writers on obstetrics. The fœtus in utero was, by Hippocrates, compared, in shape and movement, to an olive in a bottle having a throat large enough only to allow it to pass lengthways. When the shoulders or sides of the body present, delivery is prevented until the child turns one or the other of its extremities to the os uteri, which we are directed to assist the uterus in accomplishing, by pressing the head and upper part of the trunk upward, and then bringing down the lower extremities, so as to make a footling case of it. Authors have differed in opinion as to the most suitable time for endeavoring to accomplish this by manual effort. Baudeloque and Hunter recommend its being done the moment after the waters are discharged, the os uteri being dilated. Clarke advises its being done before the membranes are broken, and says if we take it when the os uteri will admit the finger and knuckles, it is the better time, because we then turn the child as if in a bucket of water. These directions, however, do not apply to cases where the practitioner, when first called, finds the waters have been long discharged, and the shoulder of the child is jammed at the superior aperture of the pelvis. Here we are directed to pass the finger and thumb, in the form of a crutch, into the armpit of the child, in order to raise the body towards its head, and towards the fundus of the uterus, till it has sufficiently moved out of our way to allow of the introduction of the hand into the uterus. But in some cases, when we are first called, the shoulder, says Denman, is so far advanced into the pelvis,

and the action of the uterus at the same time so strong, that it is impossible to raise or move the child, which is so strongly impelled by the pains as to overcome all the force we are able to exert. "This impossibility of turning the child, has, to the apprehension of all writers and practitioners, left the woman without any hope of relief." "But in a case of this kind," continues Denman, "I was so fortunate as to observe, though it was not in my power to pass my hand into the uterus, to turn the child, that, by the mere effect of the action of the uterus, an evolution took place, and the child was expelled by the breech." The following case was equally as hopeless as the above, and demonstrates the great power possessed by the uterus to overcome what were, before the time of Denman, considered as insuperable obstacles to safe delivery.

I was called to deliver Mrs. B., a lady of small stature and narrow pelvis, who had been attended in labor, during the previous twelve hours, by a young practitioner, who had discovered an arm presentation of the child. The waters had been discharged some days previous. I found the right arm without the os tincæ, in a situation for the palm of the hand to receive mine as in shaking hands. Her pains were severe and regular. It was concluded to attempt turning, preparatory to which, I gave her 80 drops of laudanum, and, after a third dose of that quantity, succeeded in allaying the pains and inducing drowsiness. After preparing the hand, I attempted to introduce it, and found the fœtus lying across the brim of the pelvis, and pressed so hard, that it was impossible to return the arm to remain any longer than while held with my hand, and that the child was in all respects immoveably fixed; nor was it possible, on account of the long evacuation of the water, and hard contraction of the uterus, to introduce a finger, although, at the time, no uterine pains existed. The case was then left for a time to nature, and a gentleman of distinguished skill, Dr. Eldredge, was called in consultation. After a few hours, the pains returned in regular succession; and on his arrival we proceeded to examine again, and, to our great satisfaction, found that nature, unaided by art, had accomplished an evolution, and the woman was safely delivered.

West Greenwich, R. I., July, 1832.

THE SPOTTED FEVER AND THE CHOLERA.

[WE gave some account, at the time, of the disease that has recently prevailed in New London. The following communication derives additional interest from the fact that its author saw and treated many of those cases. We should be pleased if he would give us a further account of the symptoms that corresponded and those that did not, and also of the precise treatment that was found so successful in the New London epidemic. Our thanks are due to Dr. Miner for his attentions.]

Middletown, Conn., July 25, 1832.

MR. EDITOR,—You will oblige me, and probably the public, by publishing the following letter. It is from a gentleman who has lately