TWO CASES OF PUERPERAL CONVULSIONS.

BY A. EVERETT STETSON, M.D., MILTON.

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THE following cases of puerperal convulsions I have taken from my note-book, deeming them of especial importance to the readers of your Journal, as verifying, by their successful termination, a mode of treatment recommended by high authority—Dr. Collins, of Edinburgh, in his work upon midwifery.

Jan. 15th, 1850.—I was called in great haste to a Mrs. W., of South Scituate, at 3 o'clock. I found her, on my arrival, strongly convulsed, and presenting the symptoms of a well-marked puerperal convulsion. I ascertained, from her husband, that she was daily expecting to be confined with her first child, that he had been suddenly awakened in the night by her spasms, and that they had succeeded each other at intervals of fifteen minutes, that she had had a "great appetite" during her pregnancy, and had complained of much pain upon the top of her head for the past week. As she was exceedingly plethoric, her pulse full and bounding, I immediately bled to the extent of sixteen ounces from each arm, ordered ice, in bags, to be applied to the top of her head, mustard poultices to her feet, with flannel blankets wrung out in hot water to be wound around her legs. On examination *per vaginam*, I found the *os uteri* well dilated, the fœtal head presenting, and well-marked contractions of the uterus at almost every convulsion. After the bleeding, the convulsions were not so frequent, but as they still continued, I determined to employ tart. ant. et potassæ, as recommended by Dr. Collins. I therefore ordered, R. Aq. pulegii, ℥viii.; ant. et potass. tart., grs. viii.; tinct. opii, gtts. xxx.; syr. simp., ℥ij. M. A teaspoonful every half hour. After taking a few teaspoonfuls, free vomiting was induced, and the pulse, which had before been frequent and bounding, became less frequent and more yielding, the convulsions ceased, and she was delivered, at twelve o'clock, M., of a living child. No convulsions ensued after delivery. After ordering an injection of senna to be given at night, and calomel with jalap, āā grs. x., I left her in the usual comatose state that follows puerperal convulsions.

Jan. 17th, 9, A. M.—Found her still insensible, though evidently improving. Ordered a blister to the back of the neck, and her feet to be rubbed briskly with mustard and water.

18th.—Less insensible; medicine had operated briskly; had noticed persons around her, but had not spoken. Ordered brandy to be given, two teaspoonfuls in the course of the day.

19th.—Still improving; would not believe that she had had a child. From this date, by careful attention to diet and nursing, she rapidly recovered. As is often observed after these convulsions, her mind never seemed to be impaired.

March 15th, I was summoned to Mrs. B., who, I was informed, "was in a fit." She was pregnant with her first child, and near

the actual time for confinement. On being informed by the attendants that she had a great swelling between the thighs, I examined and found enormous œdema of one of the *labia*. This I immediately punctured. Blood was then taken, to the extent of sixteen ounces from each arm, cold water applied to the head and mustard poultices to the feet. Having witnessed the beneficial effect of tartarized antimony in the last case, I ordered the same preparation as before and in the same quantity. As soon as the swelling of the *labium* had been reduced sufficiently to permit an examination *per vaginam*, the *os uteri* was found to be dilated, the membranes were protruding and the head of the child presenting. I immediately ruptured the membranes, and an enormous flow of *liquor amnii* took place. The convulsions recurred with every severe pain, but as soon as vomiting was induced, they diminished in frequency, and as labor progressed, they became less and less frequent, until the child was born alive, and then they ceased altogether. The labor, as far as I was capable of judging, lasted six hours. The same subsequent treatment was adopted as in the former case, and recovery, though not equally as rapid, was complete.

The beneficial effects of tartarized antimony in these cases, was exceedingly apparent by the cessation of the convulsions as soon as vomiting was excited, the relaxation of the *os uteri* and of all the soft parts. Much of the benefit derived from the use of antimony is attributable to its power of relaxing the muscular and nervous systems and thus hastening the labor. In the subsequent pregnancies a rigid diet having been enforced, and a free evacuation of the bowels procured daily, no convulsions ensued.

Reports of Medical Societies.

EXTRACTS FROM THE RECORDS OF THE BOSTON SOCIETY FOR MEDICAL IMPROVEMENT. BY WM. W. MORLAND, M.D., SECRETARY.

Nov. 26th. *Obstetric Incompetency*. Dr. PARKS related the following facts.

Mrs. L—, October 28th, 1855, was in labor with her first child, which presented the breech. She was attended by a German midwife. The shoulders of the fœtus passed the vulva at 10 o'clock, A.M. At 12 M., the pulsations ceased in the funis. At 3 P.M., Dr. Parks was summoned, and found the head still undelivered, although forcible and frequent traction had been made upon the child by the midwife. The woman had been subjected to great pain by the attempts to deliver, and shrank from even a vaginal examination through fear of a repetition of it. Dr. P. immediately suspected the cause of difficulty to be that the *occipito-mental diameter* had been brought across the pelvis by the injudicious efforts of the midwife, and, in effect, found, on examination, the *vertex* low down, and the chin high up, in the pelvis;—delivery being, of course, a physical impossibility in this state of things.

Two fingers of the right hand were passed over the child's back against the *occiput*, while two of the left hand, carried over the breast, were insert-