

As to the cause of death, that the patient never fully rallied from the last tapping was quite evident. She was, however, very comfortable, and talked about returning to her home. The announcement that nothing could be done for her, although, as we have said before, she had never hinted at the least disappointment, must nevertheless have exerted a serious effect upon her, inasmuch as she had been for many years a great tax upon the patience and strength of an only daughter, who was herself an invalid.

A CASE OF PUERPERAL PERITONITIS, WITH SUDDEN DEATH WHEN APPARENTLY NEARLY RECOVERED.

By FRANCIS J. CANEDY, M.D., of Shelburne Falls.

Was called, March 19th, at 2 o'clock, A.M., to attend Mrs. S., a German woman, in labor with her fifth child. On my arrival, I found that the liquor amnii had escaped an hour before; but, on making an examination, found the uterus high up in the pelvis, so high, in fact, that it was with difficulty that I could reach the os, which was dilated only sufficiently to allow the introduction of the end of my index finger. I could not definitely make out the presentation at this time, but decided that it was not the vertex.

The pains were not hard. Two hours later, I found the os fully dilated, and the shoulder of the child presenting. I now introduced my hand into the uterus, accomplished version, and delivered the patient of a living child without much difficulty. I then administered one-half drachm of Squibb's fluid extract of ergot, as is my custom when contractions of the uterus are sluggish, and I have reason to fear post-partum hæmorrhage, which I was anxious to prevent in this case, the woman being in poor health during the latter part of her pregnancy, and at this time quite anæmic. In a few minutes after the administration of the ergot, a firm contraction of the uterus came on, expelling the placenta, and no hæmorrhage followed. Left her at 7½ o'clock comfortable.

March 20, A.M.—Found Mrs. S. apparently doing well. Pulse 80, and regular. Had taken one Dover's powder the previous evening, for the relief of after-pains, after which she had rested well during the night. The infant was well.

March 21, 8 o'clock, A.M.—I found Mrs. S. complaining of severe pain in her head; said she had not rested since midnight, and had been chilly at two or three times, but had had no severe chill. Pulse 100, with an uneasy sensation about the bowels, but no pain. The bowels were not tympanitic, nor was there much tenderness. Could feel the uterus above the pubes, but there was no evidence of inflammation of the organ. The lochia was natural. After a careful examination of the case, I decided that the headache and fever were caused by the coming of the milk, which was beginning to be felt in the breasts.

As the bowels were constipated, I prescribed a bottle of the solution of citrate of magnesia, one-half to be taken immediately, and the remainder in six hours, if the bowels were not previously moved, and

directed cold cloths to the head. In six hours, I was sent for to see her again. The pulse was now 135 per minute. Pain in the bowels very severe, with some tenderness; countenance pinched and anxious; tongue slightly coated. I concluded that the symptoms observed in the morning, and attributed to milk fever, were caused by the forming stage of puerperal peritonitis. I directed an injection to be given at once, which produced a free evacuation of the bowels, and prescribed opium, in two-grain doses, once in three hours, until the pain was relieved. Tincture of aconite root, in two-drop doses, every four hours, with hot hop fomentations to the bowels. Six hours later, and after taking four grains of opium, I found her nearly free from pain, with a pulse 118 per minute, and with a moist skin. I found that cloths had been applied to the bowels so hot as to make quite an extensive burn just below the umbilicus, which was smarting considerably, a method of counter-irritation that I had not counted upon.

March 22d.—Found Mrs. S. quite comfortable. Had slept considerable during the night, and was, at the time of this visit, pretty thoroughly under the influence of opium, having taken ten grains in eighteen hours. The pulse was 100 per minute; bowels somewhat tender, and moderately distended with gas. There was nothing in the breasts for the child this morning, nor was there ever at any subsequent period. I prescribed one grain of opium once in four hours, directed a flax-seed poultice to be applied to the abdomen, and that she be fed on beef-tea and milk.

March 23d.—Mrs. S. still more comfortable. Pulse 92; free from pain; countenance looking very much better; has some appetite. The burn upon the bowels getting somewhat troublesome, I directed it to be dressed with mutton tallow under the flax-seed poultice. No change was made in the treatment.

From this time, she continued slowly to improve for about two weeks, the tenderness entirely leaving the bowels, except in the left iliac region, which remained somewhat sore, causing her more or less pain daily, the pain running down the left leg to the knee, and sometimes to the foot.

The left thigh was retracted, and it caused great pain at the groin to straighten it. The appearance of the leg was natural.

Suspecting a pelvic abscess, I made a careful examination per vaginam during the first week in April, but found no indication of such a condition, and attributing the pain and soreness to inflammation of the peritonæum of this region, applied tincture of iodine, and covered the part with cotton and oiled silk, but with little apparent benefit.

She remained much in this condition during the first two weeks of April, pulse averaging about 90. Appetite poor; bowels loose. During this time, she took iron, quinine, porter, beef-tea, milk, &c.

April 14th, a profuse diarrhoea set in. April 15th, she vomited a large lumbricoid worm, and suffered much with nausea and retching during the day and night. On the morning of April 16th, another worm was vomited.

I now gave her one drachm of the fluid extract of spigelia and sen-na, followed in six hours with one teaspoonful of castor oil, which brought away, within twenty-four hours, thirty-seven large lumbricoid worms. At this time she was very weak, not able to be raised up in bed without faintness. Pulse 100, small and irregular. After the ex-

pulsion of the worms, the nausea ceased, and the appetite became better, the patient taking a fair quantity of beef-tea and milk daily, which, with ale and tonics, soon improved her strength considerably, though the diarrhoea continued in a mild form for some time.

The trouble in the left iliac region and thigh improved but slowly. For two or three hours during every afternoon she had considerable fever, the pulse rising to near 100, the face becoming flushed, and headache and thirst being complained of. During the remainder of the twenty-four hours, the pulse averaged 85 to 90. She rested quite well at night, taking, every evening, one grain of opium.

The first week in May, the patient becoming somewhat discouraged at her slow progress, Dr. C. M. Duncan, of Shelburne, was called in consultation, who thought she was doing as well as she could expect, prescribed to her patience and good courage, and recommended a continuance of tonics, nutritious diet and counter-irritation.

At this time her pulse was 80, but intermittent. From this time up to the day of her death, which occurred May 22d, her improvement was constant, and, during the last week, had been rapid. The evacuations from the bowels had become natural, her fever had left her, the pain and soreness in her bowels and leg had pretty much subsided, and she could walk about her room quite well. Her pulse, for one week before her death, had been 75 and regular. In the afternoon of May 22d, while lying upon her bed, after feeling unusually well during the day, she called for water, saying she was faint, and expired before her friends could reach her bedside.

The autopsy took place May 23d, P.M., Drs. C. M. Duncan, C. E. Severance and myself being present.

The stomach and bowels were considerably distended with gas, which we concluded was *post mortem*, as it was not observed when I examined the body a short time after death the previous day. There were about four ounces of water in the pericardium. The heart was normal in size and form, as was also its walls and valves. In the right ventricle was a clot, which had the appearance of being pure fibrin, some two and one half inches long, and threefourths of an inch thick at its largest extremity, gradually tapering to a point at the other. This clot was so firm that some force was required to break it down, and of a light, almost white color, except at its larger extremity, which seemed to contain red blood-discs. Pulmonary veins filled with coagulated blood. In the abdominal cavity there were some six ounces of water, but no pus. The uterus appeared normal. The peritoneal covering of the left Fallopian tube and ovary was somewhat congested, and a portion of the fimbriated extremity of the tube was adherent to the walls of the abdomen at one point. The peritoneal covering of a portion of the small intestine on the left side was reddened, showing the marks of recent inflammation. The spleen was large, and adherent to the walls of the abdomen at one point, and also to the stomach above the gastro-splenic omentum. The liver was much congested, but in other respects normal. The kidneys were not examined, as no symptoms of trouble in those organs had ever been observed in the patient. Lungs healthy so far as examined. Brain not examined.