inevitably be followed by unpleasant symptoms. It is proper, also, to advise the patient to place herself in the recumbent position when the time is approaching, and this posture is to be continued throughout the whole period. In forming your judgment in these cases, the *natural* quantity of the secretion, in each individual case, must be taken into the account, or you will be very likely to fall into error. In addition to bleeding and spare diet, moderate purgation should be employed.

In the more common cases of what is called menorrhagia, you will find not only an alteration in the quantity, but in the quality also of the fluid effused, for the discharge consists of pure blood, instead of the menstrual secretion, and hence might with greater propriety be called hæmorrhage from the unimpregnated womb. These irruptions of blood take place in the two opposite conditions of system, viz., of plethora and inanition, from which the division into active and passive menorrhagia, the former connected with, if not depending upon, an increase in the force, as well as the frequency of the arterial circulation, the latter resulting from extreme weakness of vessels, appearing indeed to depend upon congestion, and a retarded motion of the blood. Before entering at large upon the subject, I must remind you of the diagnostic mark between blood and the proper menstrual flow, and this you will recollect is a very simple one. If it be the former (blood), it will coagulate, either passing away in clots, or stiffening the napkins, which imbibe it. In all cases of doubt, carefully examine what has passed away, and you will find no difficulty in distinguishing the one from the other, as the proper menstuous secretion never coagulates.

ATTACHMENT OF THE PLACENTA TO THE CERVIX UTERI.

To the Editor of THE LANCET.

SIR :—Several medical gentlemen, to whom Mr. Wilson and myself have related the following case, are of opinion that it contains some critical points of practice, and that it might be worthy of insertion in your valuable publication. The case was one of adhesion of the placenta to the cervix uteri, to a greater extent than Mr. Wilson or myself had ever experienced, attended with alteration of its structure, and great danger arose from its obstructing the descent of the foetus into the pelvis, combined with hæmorrhage to a frightful extent. I am, Sir, yours most obediently,

WILLIAM SIMPSON.

110, Guildford-street,
Nov. 25, 1839.

On Wednesday, the 13th instant, I was sent for to see a patient in the neighbourhood of Finsbury-square, being engaged to attend at her confinement, which she expected about Christmas. I learned, on my arrival, that she had lost a great deal of blood from the uterus during the previous twenty-four hours. On examination, I found the os uteri sufficiently open to admit one finger, but there had been no pains or uterine contractions. By the application of cloths dipped in cold water over the uterus and pubis, combined with absolute rest in a recumbent position, I was able to arrest the hæmorrhage, and, during the following few days, every thing appeared to be going on well. On the fifth night (Sunday) at about 12 o'clock, the hæmorrhage returned with increased violence. Before morning the bed and bed-clothes were completely saturated with blood, and she was scarcely able to move from exhaustion. From a foolish feeling of not wishing to disturb me during the night, I did not see her until the forenoon of Monday. On examination, I found the os uteri dilated to the size of half-a-crown, but completely blocked up by the placenta; there were also frequent and regular pains in the back. Having waited about an hour, during which time I tried to irritate the uterus with my finger, so as to induce vigorous action, the only result, however, being increased hæmorrhage, I found myself obliged to have recourse to more energetic measures to hasten delivery. During the next hour and a half I gave her about four scruples of ergot, in four doses; this had the desired effect of increasing the pains, and dilating the os uteri to its fullest extent, but also increased the hæmorrhage without altering the position of the placenta or foetus. I now determined to introduce my hand, and, if able to touch the membranes with my finger, to rupture them and bring down the feet. I found the placenta completely grown to the whole circumference of the cervix, with the exception of one spot only, large enough to admit my forefinger; it was so adherent, and so highly organised, as to convey the sensation of there being an uterus within the uterus, the edge of the placenta feeling precisely the same as the edge of an os uteri, dilated to the size of the spot alluded to above. Having succeeded in enlarging the opening to double or treble its size, and the pains continuing strong and frequent, at the urgent solicitation of the patient, I withdrew my hand, in hopes that the membranes would become protruded and the foetus follow in the usual way. In this I was disappointed, and fearing she would sink from loss of blood, I determined to call on my friend Mr. Wilson, sen., of Charlotte-street, and ask his opinion whether I should at once rupture the membranes and bring away the foetus. He kindly offered to ac-

company me, and I requested him to make the same examination as I had done, and, if he found my opinion correct, to lose no time but push through the opening and bring down the feet.

"This Mr. Wilson found to be necessary. On clearing the vagina from the coagula, he found the os uteri fully dilated, and obstructed by a firm carneous mass, intermixed with coagula, and firmly adherent to the uterus, excepting a small space. Passing his hand partly through this mass to a considerable distance, the membranes were found not ruptured, and through them was felt the arm of the foetus. The feet were sought for, but so great was the obstruction of the placental mass in which the hand was involved, that the operator did not succeed in finding them. The membranes were now ruptured, but the arm plugging up the vagina, prevented any quantity of the liquor amnii from escaping. The hand was now passed along the arm and abdomen of the foetus, and one foot was readily grasped, but the other was bent upon the nates. Having the foetus, as it were, now floating on the waters, and being anxious to accomplish the evolution before their escape, Mr. Wilson passed his hand along the pelvis until he succeeded in finding the second foot, and pressing firmly with the back of the hand against the head, while he used gentle traction at the feet, the body gradually turned over, and with considerable obstruction, from the indurated placenta, he brought the feet through the os extrenum.

"Mr. W. now waited a little for the occurrence of natural pains to assist in contracting the uterus, but they were very feeble, notwithstanding some brandy and other stimuli, which had been administered, and with a view to excite them, pressure was made on the abdomen.

"The nates now passed the os externum, and first one arm, and then the other, being quickly hooked down with the fore-finger, in order to prevent pressure on the funis, it was laid on the hollow of the neck. There was no pulsation in the funis when the hand was first introduced into the uterus. The head now quickly followed, but hæmorrhage still continued; gentle traction at the funis was used, when it was suddenly torn away from the placenta by a convulsive jerk of the patient. The danger of the patient from hæmorrhage was now alarmingly increased; therefore the hand was again immediately introduced into the uterus, and the placenta, after several efforts, brought away in shreds, with considerable difficulty."

On viewing the part brought away, it had more the appearance of mamma or pancreas than placenta, being a highly vascular and organised substance, and nearly the size of two hands. By using bandages, and giving cordials, we were able to prevent her from sinking; but during the next 24 hours,

Dr. Marshall Hall himself would have been alarmed at the effects of the loss of so much blood, and surprised that any person could have survived under such circumstances. On the second morning after delivery, she suffered a good deal of pain from the passing of a large coagulum; but I succeeded in allaying the pain by applying warm fomentations, and throwing up into the rectum about a pint and a half of warm water, with a drachm of laudanum. She is now in that state which is denominated "as well as can be expected," which is not only gratifying, but surprising to her husband and friends, and particularly so to Mr. Wilson and myself. As our hopes were very faint at one time, I feel extremely obliged to Mr. Wilson for his approbation, and prompt assistance in the case.

* * We have embodied Mr. Wilson's letter in the case.

RECOVERY AFTER EXCESSIVE FLOODING.

To the Editor of THE LANCET.

SIR:—Will you be good enough to insert the following case, not so much for its rarity as for the great power of nature to rally from excessive hæmorrhage, when aided by artificial stimuli. I am, Sir, your's obediently,

J. H. C. W. DENHAM, M.R.C.S.L.

Stratton, Cornwall, Dec. 16, 1839.

On the 1st of the present month I was called hastily to attend E. B., eight months gone in her 7th pregnancy. On my arrival, I found her in a state of complete syncope. No pulse could be felt at the wrist, and the action of the heart so weak as with difficulty to be perceived. On examination, I found the loss of blood had been excessive; the bed was completely saturated, and a considerable quantity had been caught in the chamber utensil by the attendants. I ascertained from the mother and husband that she had flooded continually for nearly a month past; but the quantity not being alarming, took but little notice of it, although from the commencement of that period up to the present date the quantity had certainly been increasing. From the circumstance of the hæmorrhage commencing in the last months of pregnancy, its long continuance and gradual increase, and the absence of any accidental existing cause, I was led to suspect a placenta presentation, and the hæmorrhage one of the unavoidable class; and on introducing my fingers into the vagina, the placenta was distinctly felt, stretching across the mouth of the womb, at once confirming my suspicion, and giving the woman but little chance of her life.