Under these circumstances the os uteri quickly dilated, the head entered the cavity of the pelvis, and the "fluid wedge" came to protrude at the outlet. The parietes of the vagina, and the soft structures at the outlet of the pelvis, yielded with a magical celerity; the head swept the perinæum, and emerged into the world with the funis coiled once round the neck. On my rapidly disengaging the cord, a single powerful effort expelled a stout, full-grown child, without the slightest indication of suffering or distress being evinced by the mother, who continued in a state of profound repose, such condition being sustained by re-sprinkling a few drops of chloroform on the handkerchief when necessary. From four to five minutes after the birth of the child, a large placenta was expelled, and the uterus contracted firmly. Whilst applying the binder, the mother awoke, and was apprised that all was over by the strenuous vocal efforts of a lusty, vigorous infant. About thirty minutes had elapsed from the commencement of the inhalation to the expulsion of the placenta, and after seven or eight minutes more, the mother ceased to be drowsy. I never witnessed a better recovery.

II. Rigidity of the os uteri overcome; chloroform employed before rupture of the membranes.

By JOSHUA PARSONS, Esq., M.R.C.S., Beckington, Somerset.

Ann P.—, aged thirty-two, short and robust in figure, but delicate in health, was taken in labour on January 22nd. I had previously attended her in two premature labours, and one at the full period, on all which occasions she had suffered long and severely from rigidity both of the os uteri and the external passages. On making an examination, at seven P.M., I found the os uteri dilated to the size of the rim of an ordinary wine-glass, but extremely firm and hard. The membranes were whole, and she had been suffering pains all day. The external passages were in the state so graphically described by Dr. Rigby as being dry, hot, tender, and feeling as if stretched tightly over the bones. After half an hour's continuation of the pains, finding no appreciable change in the state of the parts, and seeing no prospect but a repetition of her former wearisome labours, I proposed inhalation, at least as a means of obtaining a temporary rest. She immediately consented, and was soon enjoying a quiet sleep, during which the pains, however, continued. In half an hour I again examined, and was as much surprised as gratified to find the head of the child resting on the perinæum, and the external parts dilatable and plentifully lubricated with mucus. My stock of chloroform being now exhausted, the woman was conscious of the two succeeding pains, which sufficed for the birth of the child. The placenta was soon expelled, attended by much less hæmorrhage than on previous occasions. Both mother and child are now well, the woman thankfully expressing the difference between her feelings on the recent occasion and subsequently to her former laborus.

III. Great rigidity within the os uteri; chloroform administered with advantage after rupture of the membranes.

By C. D. ARNOTT, M.D., M.R.C.S., &c., Gorleston, Suffolk.

S. H.—, aged forty-one, of somewhat haggard aspect, in labour with her seventh child, seven years having elapsed between this and her last confinement. Labour commenced about two A.M. of the 14th of December, the pains recurring very regularly at intervals of about twenty minutes. Upon visiting her at ten o'clock, she appeared unusually alarmed and apprehensive, in consequence, as she said, of her previous painful and tedious deliveries. The passages were dry, rigid, and hot; the os uteri unyielding and undilatable, opened up to about the size of a half-crown, and just within it a constricted band of circular fibres, apparently of still more intractable texture, imparted to the touch the feeling even of carcinomatous degeneration, upon which a strongly ossified foetal cranium rested as upon a shelf. To add further to this unpromising state of things, the membranes had some time previously ruptured, and the liquor amnii drained away guttatim—thus putting one of the most efficient preparatory agents of the parturient process completely in abeyance. The pulse was, however, little or not at all affected, either in its frequency or other characters.

I determined upon the administration of chloroform. A lawn handkerchief was moistened with half a drachm of the fluid, and held over the mouth and nose a short time antecedent to the accession of the uterine throes. The anæsthetic effect was promptly developed, and it seemed to me to be still more readily induced at each succeeding exhibition, suggesting the impression of its possessing a cumulative

action. After the fourth parturient effort, under the influence of chloroform, the vagina was found pretty freely lubricated with mucus; the os uteri was much more widely opened, as well as more dilatable; and the previously existing circular band of unyielding fibres assumed a crescentic shape merely, the posterior segment of the circle being completely obliterated. The expulsive forces gradually succeeded and increased both in frequency and intensity; the foetal head descended with its face anteriorly, and was at last thus expelled—the shoulders and body quickly following at about half-past eleven A.M., or one hour and a half from the first administration of chloroform. The placenta followed in about three minutes. Sensation returned just prior to the completion of the process. During the violence of the terminal expulsive efforts, so perfectly was all pain annulled, that the woman gave not the least indication of suffering, either by the slightest voluntary muscular movement, or the utterance of any, even the least, expression of uneasiness. The women present were astonished beyond description upon first hearing the infant, as they had scarcely, even yet, believed but that "the labour was stopped."

Upon subsequent inquiry, the patient declared that she was conscious of the birth of the child, but that all pain was assuaged. So slight was the depression, and so trivial the exhaustion, that she seemed more than half induced to get up.

A trivial amount of bronchial irritation ensued upon the first inhalation of the chloroform, but it speedily subsided. The patient also complained of slight smarting about the lips and face: this was also very quickly allayed.

IV. Violence of parturient pains assuaged; absence of after-pains.

By W. HOME POPHAM, Esq. Judd-street, Brunswick-square.

CASE 1.—On the 1st of January I was called to attend Mrs. M.—, at four o'clock A.M. I found, on examination, the os uteri fully dilated; labour-pains had existed for some hours; and in a short period the head descended so as to rest on the perinæum. The pains were strong and forcing, and recurred every three minutes with much violence. I administered chloroform by sprinkling half a drachm on a pocket-handkerchief. After a few inspirations, she became insensible to pain; the character of the pulse was not much altered, and she was conscious of what was passing. Immediately on administering the chloroform, the frequency, violence, and length of the pains were much reduced, occurring only every six or eight minutes. She continued to inhale the chloroform till labour terminated,—in an hour and a half,—during which time an ounce had been employed. When she recovered she expressed her satisfaction; and both mother and infant did remarkably well. There were no after-pains, though she had suffered severely from them in her two previous confinements.

CASE 2.—On Jan. 24th, I was called, at six P.M., to attend in her first labour, Mrs. S.—, aged twenty-two. I found the os uteri only just beginning to dilate; I left her and returned at ten, when I found it fully dilated, and the pains strong and frequent; the head had descended nearly to the perinæum. I now commenced the exhibition of chloroform: the pains immediately became less frequent, and she appeared as if in a tranquil sleep. The inhalation was continued for two hours, during which period an ounce and a half of the fluid was consumed. The pains now became more frequent; she was sensible to them, and expressed a desire for more chloroform. The head passed in ten minutes after, and the case terminated favourably. She said she had not felt any pain until the chloroform was expended. There were no after-pains.

CASE 3.—I was called, at one o'clock A.M., to Mrs. E.—, aged twenty-three, in her first labour. On examination, I found the os beginning to dilate, the head presenting naturally. I left her and on returning at eight o'clock, I found the case had made little progress. I continued to visit her at intervals, till three P.M., when the os uteri became fully dilated, but the pains were very weak, and occurred every eight or ten minutes. I now gave a drachm of secale, in three doses; in half an hour the pains became strong, and were almost continuous, when she begged me to give her something to ease her. I sprinkled about half a drachm of chloroform on a handkerchief, and made her inhale it; in three minutes she was quite insensible, and breathed stertorously. The pains, though strong, occurred now only at intervals of four or five minutes. She continued to inhale for one hour and three-quarters, (using six drachms,) when the child was born; and on recovering consciousness, she stated she had not felt the slightest pain. She is now doing very well.