

ERGOT OF RYE.

To the Editor of THE LANCET.

SIR,—I transmit, for insertion in your valuable periodical, the following brief account of a case of lingering labour, in which the beneficial effects of the *secale cornutum*, in exciting uterine contraction, were strikingly exemplified.

A female, ætat. 40, was taken in labour with her first child a few days ago; she had been seventy-two hours in labour, when I was summoned to her assistance. On examination, I ascertained that the head was low in the vagina, the os uteri widely dilated, the os externum dilatable with abundant secretion of mucus, but the pains had totally subsided; she had strong, but irregular pains for the first forty-eight hours. Her friends and the midwife urged me earnestly to interfere, and deliver her immediately. I determined to give the *secale* a fair trial previous to the use of instruments, and a scruple dose was exhibited every twenty minutes. In half an hour after the third dose, the pains were renewed, and, in two hours, the patient was delivered of a still-born child. I think the *secale* of very great utility in the practice of midwifery, and I am confident it will, when administered at a proper period, save the practitioner the trouble and danger of instrumental delivery in many cases.

I have several times tried it before, in smaller doses, but its effects did not appear so decided as in this instance.

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Bandon, Oct. 30, 1829.

LONDON MEDICAL SOCIETY.

November 9th, 1829.

Mr. CALLAWAY in the Chair.

THE business of the last meeting was private, and we have nothing, therefore, to communicate respecting it. On the present evening, after an invitation to the members to renew the discussion on the operation of lithotripsy, the president drew the attention of the members to a case which introduced a discussion on the

TREATMENT OF HERNIA.

THE PRESIDENT stated that he was requested, a short time since, to see a man, forty-seven years of age, who was labouring under severe constipation of the bowels, no motion having passed for five days. The

countenance was anxious, the pulse was depressed, the abdomen was painful, and there was occasional vomiting. On inquiry, he discovered that the man had inguinal hernia on each side of the abdomen, and both ruptures proved to be down. The right was easily reduced; the left not without great difficulty, but the patient expressed himself afterwards to be greatly relieved, and the vomiting ceased. At the commencement of the taxis, he lost twenty ounces of blood. No medicine was given him until the evening. He had previously taken calomel, opium, sulphate of magnesia, and senna, and had had four drops of croton oil. He left the patient, and when he called again, a woman in the house stated that a motion had passed, and the contents were of a feculent nature. Eight hours after the man died, and, on examination, from the result of which it was that he had been induced to call the attention of the members to the case, it appeared that a large fold of the intestine had been strangulated in the sac, containing nothing, a line of demarcation distinctly marking the points of strangulation; the inferior portion of the gut was filled with the usual dark, claret-coloured matter, and exhibited many gangrenous spots. He regarded the case as one in which, although the gut was returned, it had not sufficient power left it to recover its former tone, and its vitality being gone, the decease of the patient followed.

Dr. WHITING considered the case to be one of great moment, but he did not sufficiently understand to what cause the patient's death was ascribed. He wished to know whether the portion enclosed in the hernial sac was distended with gas or not, and what was its condition as to texture.

THE PRESIDENT replied that the intestinal canal was perfectly healthy in every part, but that which had descended. There, it was very flaccid, and felt inelastic; the mucous coat was highly inflamed, but not the peritoneal; the hernial portion was not more distended than any other. The opinion which his experience in this and other cases had led him to adopt, was, that the sooner the operation was performed in hernia the better; for a long delay too often occasioned ulceration of the gut, the evacuation of the feces into the belly, and speedy death.

Dr. WHITING adverted to the case again, with a view to express an opinion on the pathology of hernia. A similar case, he observed, had lately been related by Mr. South in another society, in which also no feculent matter, or contents of any kind, was discovered in the hernial sac, but the portion of the intestine above was distended with gas. It became a question, why there was none in the sac; for, if the intestine were paralysed, it ought to be distended with gas from inability to prevent its admission. The