

of small doses of Fowler's solution, combined with nitrate of potash and colchicum as the standard remedies (many of those noticed having been introduced as auxiliaries), he was in time so much improved, if not perfectly cured (which was scarcely to be hoped for), that for more than six months consecutively, he was able to perform satisfactorily all the duties of nurse to the ward. While thus engaged, he was seized with an attack of bilious pneumonia, from which he slowly recovered. During his convalescence, though still confined to bed, from which for weeks he was unable or not allowed to get up, there was found, one morning, a number of small red spots of a suspicious character, but which, ere long, lost all dubiety, and were pronounced genuine smallpox. In a short time he was removed to the smallpox hospital, located some distance off; for, by a law of this institution, that disease is not allowed to be introduced, and if by accident in any way it should appear, the individual must be summarily removed. Now in what manner was the disease communicated? Had the man been moving about, it is conceivable that he might have seen or spoken to some one having the disease lurking in his clothes. But as this man had been confined to bed for weeks, had neither seen nor spoken to any one outside of the wards, in which at that time it is certain there was no case, it is clearly demonstrative of the often inexplicable manner in which that loathsome disease originates. After the lapse of some months he returned to the same ward, having passed through a very severe attack. For some time he has been but little annoyed with his old complaint, and is now able to render efficient aid as assistant nurse to the many sick daily admitted into the wards.

POSTURAL METHOD OF TREATMENT IN ASPHYXIA.

BY HENRY M. SAVILLE, M.D., QUINCY.

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THE value of the "Marshall Hall method" of inducing respiration in asphyxia by submersion, or in asphyxia of new-born infants, has so frequently borne the test of rigid investigation, as to render any explanation of the principles involved unnecessary. But it seems to me not undesirable that cases illustrating the efficiency of prone and postural movements, in resuscitating apparently drowned persons and new-born children, should be published while any lingering doubts of their practical value prevail in the community.

L. H., *ætat.* 17—a delicate, bilious-looking young woman, in her first pregnancy. After a prolonged and powerless confinement of thirty hours' duration, I effected instrumental delivery of a large female child. Its body was cold, there was no perceptible pulsation of the funis, and for at least an hour previous to the delivery

I had been unable to detect any beating of the foetal heart. So well convinced was I that the child was stillborn, that I permitted the attendants to put it away in a basket of soiled clothes. In the course of five minutes, finding I was liable to be detained an hour or two with the mother, I removed the child from its resting-place, more from motives of curiosity and for the purpose of acquiring some dexterity in the manipulations of the "ready method," than with any expectation of relighting the flame of life in the little corpse. However, I persisted in semi-rotating the body, in accordance with the directions of Marshall Hall, unremittingly for eighteen minutes before any sign of vitality rewarded my exertions. The first indication of approaching consciousness which I observed, was a kind of tremulous vibration of the abdominal muscles. Shortly after, a succession of faint single pulsations of the heart; and finally, after twenty-three minutes of persevering efforts, I had the satisfaction of presenting a living daughter to the delighted mother. My own baptismal appellation was bestowed upon her, and I am happy to say that Henrietta S. has been thriving vigorously ever since.

An interesting feature of the case I am relating occurred during the earlier stages of labor—affording a well-marked instance of the transfer of uterine pains to the muscular coats of the bladder. The patient had complained of a distressing sensation above the symphysis pubis, and requested something to relieve the pain. While waiting the progress of the case, I noticed that the uncomfortable feelings she experienced above the pubes seemed to alternate with the genuine contractions of the uterus. (*Vide* a similar case in Dr. Power's Essay on "Metastatic Labor," Case No. VIII.) The employment of the catheter relieved her pain at once, and restored the sympathetic nerve-force to its proper uterine channels.

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THE ETHER SUIT FOR DAMAGES—W. E. C.'S REPLY.

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MESSRS. EDITORS,—I was not aware I had "wantonly thrown out" "various insinuations and imputations" against Dr. Davis. I do not know what they are, but I retract all of my language that can be construed into such. I had but one charge, and that not my own, but copied from a daily print, where it had remained unanswered for a month. I again state my reasons for such an unusual course in meddling with the affairs of another physician. I did not consider it his affair alone. It was a matter which would be felt by every one of us, unless he stood up resolutely, manfully and prudently to the fight. He was charged publicly with not doing this, and there were several reasons for believing the charge—some stated, others reserved. This is my justification for what I