

BITE OF A RATTLESNAKE—RECOVERY.

[Communicated for the Boston Medical and Surgical Journal.]

MESSRS. EDITORS,—During the State Fair held at Saratoga Springs, last fall, Mr. Belcher, who exhibited rattlesnakes, was bitten in his little finger by one of them. The fang was deeply inserted, and it required some effort to shake the snake off. Supposing he had extracted all the poisonous fangs, he took little notice of the bite for some minutes, but the pain and swelling soon gave him alarming proofs of his danger.

In about forty minutes after he was bitten, I saw him. The finger was enormously swollen, and the hand also, for about half way to the wrist. I immediately ordered brandy (which was at hand) to be given, one third of a good-sized tumblerful, clear, every half hour. I made deep incisions on each side of the finger, and had the finger, hand and arm wrapped in cloths wet in brandy and salt. After ten hours, the pain being very severe, I applied stramonium poultice to finger and hand, which were discharging freely, from the incisions, a bloody water. The swelling continuing slowly to extend, I exchanged the brandy for whisky, and continued cloths wet in liquor and salt.

The second day, his stomach becoming irritable, I stopped the whisky a few hours, gave quarter-grain doses of act. morphia, applied cold cloths to the stomach, gave weak broth; and the swelling continuing to increase, I again commenced the whisky in smaller quantities.

I continued this treatment three days, before the swelling, which had extended above the elbow, was entirely arrested, giving about one grain of morphia every twenty-four hours. On the fifth day, the finger began to suppurate. I opened it the next day, and it continued to discharge freely for several days. Boils came on the arm, as far as the swelling extended; in all, about eighty at one time.

His convalescence from this time was rapid, and he recovered perfectly, except the use of the little finger. He drank, during the first four days, seven quarts of brandy and whisky, with very slight symptoms of inebriety.

Yours truly,

L. E. WHITING.

Saratoga Springs, April 17, 1854.

CASES OF LABOR.

[Communicated for the Boston Medical and Surgical Journal.]

MESSRS. EDITORS,—I communicate the particulars of two cases of labor, which occurred in my practice during the past year, thinking you may deem them of sufficient interest to find a place in your valuable Journal.

CASE I. was that of a healthy married female, aged about 30 years, mother of one child. Several attacks of uterine hemorrhage during the last months of gestation led me to anticipate the nature of the case. She was taken in labor on the 10th of August. Before I could arrive, she had flooded to an almost incredible amount, and was nearly pulseless. I gave stimulants freely, and hastened to remove from the os uteri, which was dilated to the size of a half dollar, a very firm, pale coagu-

lum about the bigness of an egg. I could then feel the placenta, which was large and attached directly over the os uteri. Finding that I could detach it without difficulty, I removed it entire, *hoping* that the case might terminate favorably without further interference. All hemorrhage ceased from that moment. To my surprise, the child's hand was immediately presented. I returned it once or twice without avail; and finding that the case was complicated by the unusual position of the fœtus, proceeded to turn immediately, and delivered the child by gentle traction, accompanied by firm pressure over the womb—everything like uterine contractions having ceased from exhaustion. The child was, of course, dead.

The mother, after a tedious convalescence, recovered with difficulty, being left in a highly irritable and anæmic condition.

My object in removing the placenta, instead of pursuing the usual method in similar cases, of immediate delivery, was to avoid, if possible, the necessity of turning, in the patient's exhausted condition. The loss of blood in this case was so excessive, that I am surprised it did not prove fatal.

CASE II.—Was called hastily, on the morning of the 13th of October, to Mrs. H., aged about 30, in labor with her third child. She had had severe pains, for twelve hours previous, under the management of an ignorant and pretentious midwife; who, having become terrified on discovering the nature of the case, sent immediately for medical assistance. The patient's agitation on my arrival caused a temporary cessation of the pains. I proceeded to make an examination, and found a hand protruding from the vagina, which proved to be the right one. Further examination convinced me that the position of the child was the one stated by authors to be the most favorable for spontaneous evolution, the head lying directly behind the os pubis. I determined to await the results of the efforts of nature to accomplish delivery, for a short time at least, before proceeding to turn. The uterine contractions soon returned with much violence, and nearly the whole arm having been first protruded beyond the vulva, and then completely withdrawn, I had the satisfaction of seeing delivery accomplished without the slightest interference on my part, the breech presenting.

The child appeared dead, but was resuscitated with much difficulty. Its right breast and shoulder were very much bruised. Both mother and child did well; the latter being now remarkably healthy. The time occupied by the labor, after my arrival, was about twenty minutes.

JOHN L. SULLIVAN, JR., M.D.

Malden, April 15, 1854.

MEDICAL SCHOOLS IN BOSTON.

[THE following recent legislative documents, although in a measure local in their character, are entitled to a place in our pages. It will be seen that names of the highest respectability are attached to each, and we have no doubt that both parties are influenced by laudable motives in the