

and sides of the pelvis; the labia were two inches long, and formed a kind of external cavity.

Had I not procured a history of her former labour, the case, as to how the laceration took place, would have been involved in much obscurity; it can, I feel, be satisfactorily explained, viz., three days in strong labour, extreme rigidity of the os internum, delivered suddenly without any assistance, &c. This could have arisen only from laceration of the uterus during the labour; hence also its consequent adhesions to the perinæum and sides of the pelvis, in consequence of the inflammation and coagulable lymph thrown out during so protracted a case. Whether the gentlemen were aware of what happened, or what sort of recovery she had, does not appear.

In a pathological point of view, I feel this case to be of great importance, and perhaps the most singular of the kind upon record. After so extensive an injury, becoming again impregnated, and sustaining a further extensive opening at its posterior side, from its friction against the os sacrum, all this with apparent impunity, shows the wonderful resources of nature.

It appears not the least singular part of this case, that the only remains of the os tinæ was the foramen already mentioned. Physiologists must decide how far this case is calculated to elucidate that wonderful and mysterious act of Providence—CONCEPTION. The sole mode of impregnation was by this small opening in the uterus; and the only lodgment for the semen was between the labia, the vagina being quite obliterated.

Should there appear any obscurity in the relation of this case, I shall feel happy to afford you or your correspondents any further information in my power, having made too deep an impression on my memory ever to be eradicated, witnessing so much distress and suffering without power to alleviate them.

I have, at some future period, to communicate some extraordinary particulars of a case of retention of urine. Sir Astley Cooper mentions it in No. 13, page 410, of *THE LANCET*; I am the person there spoken of. A cast of the case is in the Museum of St. Thomas's Hospital.

Great Baddow, Chelmsford, Essex,
1 January, 1828.

SUCCESSFUL CASE OF TRANSFUSION.

By J. Howell, Esq. Bridge Street, Southwark.

THERE has rarely been a more important operation proposed to the profession than that of transfusion, and if on further trials

it proves deserving the character it would seem entitled to, it will reflect the highest honour upon Dr. Blundell, and be the means, in the hands of enterprising men, of saving the lives of many of the most interesting part of the creation, who would fall victims to uterine hæmorrhage.

A poor woman, the mother of twelve children, 40 years of age, had a second time engaged me to attend her in her accouchement, which she expected to take place at the beginning of the ensuing month of March. On the 31st ultimo, I was hastily summoned to her, and found, that about half an hour before, without experiencing any pain, whilst quietly occupied with her needle, she had been attacked with one of the most frightful hæmorrhages I had ever seen. She was then flooding most profusely, and had lost, before my arrival, a small chamber-vesselful of blood. I immediately laid her on the bed, and, on examination, found the os uteri sufficiently dilated to admit my finger, and quite free from any connexion with the placenta. I directly ruptured the membranes, the liquor amnii escaped, the uterus contracted, and the hæmorrhage instantly ceased. The pulse was feeble, and she complained of being very faint, a state which I did not think it prudent, of course, to interfere with. I applied cold water to the uterine region, lessened the temperature of the apartment, and adopted all those precautions the serious situation of my patient called for. I remained with her some time, but as the flooding had ceased entirely, and she was free from pain, I left her, charging her friends to keep her cool and quiet, and should any pain come on, or the slightest hæmorrhage, to send for me directly. This was about half past three o'clock P.M., and about six I was sent for, in consequence of labour pains coming on. I found she had but very little pain, and the flooding had returned in a very slight degree, but, before my arrival, had entirely stopped. The os uteri remained rigid and undilated. She was very faint, and the extremities cold; indeed the aspect of the patient was altogether alarming. In this state of prostration of the vital powers, there was not absolute syncope, and the stomach remained undisturbed. As there was no contra-indication, I did not hesitate to administer brandy to the amount of five or six ounces; but although it rallied her for a few minutes whenever she took it, she sunk at last into such a state of collapse, that I apprehended a fatal termination, unless something more were speedily done for her. With these feelings, I requested the advice and assistance of my friend Mr. Ravis, of Union Street; who, after observing the inefficacy of stimulants, and finding the woman cold, excessively cold, with an imperceptible

pulse, and supervening insensibility, agreed with me, that nothing but transfusion held out a shadow of hope. Delivery had nothing to do with it: there were no pains; there had been no hæmorrhage since my second visit; therefore delivery could have availed nothing, but would necessarily have induced some loss of blood, and thus, probably, have placed the woman beyond hope. Seeing, then, that nothing but the operation allowed any chance, and knowing that our neighbour, Mr. Doubleday, had acquired some tact in the performance of it, we lost no time in soliciting his assistance, which was granted us with that readiness creditable to Mr. Doubleday, as a man of humanity, and one interested in the improvement of our profession. The woman was now in the most exhausted state, and could be prevailed upon to take only very small quantities of brandy, asserting, when able to articulate, that she was dying. No pulse to be felt; the respiration scarcely to be recognised; the whole body as cold as ice; the very breath cold, and with that high degree of restlessness so characteristic of the last stage of these lamentable cases, it was very evident the patient could not long survive.

A good supply of blood being obtained from the husband, a hearty coal-heaver, the operation was commenced twenty minutes before eight o'clock, and occupied fifty minutes, during which time twelve ounces of blood were cautiously injected. When the first five ounces had been thrown up, the pulse was perceptible at the wrist, and the patient, with increased power, declared she was better, and should do very well. At the conclusion of the operation, the woman was warmer, and continued getting so, taking, from time to time, some brandy and water, and as much warm milk as we could get her to swallow; still the pulse remained indistinct and fluctuating. At about nine o'clock the pains returned, and the os uteri quickly dilating, in about an hour after the transfusion, the patient was delivered of a dead child, the placenta almost immediately following. By carefully kept-up pressure above the pubes, the uterus was made to contract firmly, and very little blood followed the after-birth; yet there was enough to produce a sensible effect on our patient, again inducing the coldness and faintness slightly. Fortunately, however, this was removed by some brandy and water, with a full dose of laudanum, so that an hour after delivery, the woman was tolerably easy, much warmer, and inclined to sleep. We left her with a feeble pulse, but, in other respects, comparatively comfortable; and, with the assistance of another opiate, she passed a tranquil night. It may be mentioned, as showing the extreme condition of

the patient before and during the operation, that she was quite insensible to any pain from it. It should be observed, too, that after the first injection, a disposition to nausea, unattended, however, with vomiting, was produced.

Did the transfusion occasion the recurrence of the pain?

It is only necessary to add that the patient has gone on very well, no untoward symptom having appeared; and she is now in such a satisfactory state, as to leave no doubt of her speedy recovery.

ROYAL INFIRMARY.—DR. CULLEN.

To the Editor of THE LANCET.

“Man, vain man,
Drest in a little brief authority.”

SIR,—BECAUSE I admire the talents and knowledge of Dr. Cullen, I cannot but regret the inconsistency of his conduct and the defect in his manners. Dr. Cullen being now a public person, is responsible to public opinion; and however unimportant his conduct and manners in a private capacity, when they affect society at large, from being insignificant they may become noxious. Neither ‘the antique doctrinal costume;’—the wig—the ‘genuine gold-headed cane,’ nor “una loquëta especiosa, sostenida de cierto ayre grave, y al mismo tiempo meloso, junto con algunas afortunadas curas,” attracted me to the wards over which the doctor presides; but a very general report of his ungentlemanly conduct towards the resident physician’s clerk. If any, therefore, have been drawn into the circle of his auditors, as Scotus supposes, from the expected amenity of his manners, they must have been greatly disappointed; but I am sure that many have been added from the contrary prevalent report, and were astonished at the fact.

Something may be allowed for the intoxication of new authority; but then we must infer a weakness of intellect.

Some excuse may be made for ignorance of the custom; but then we imply an unfitness for the duty.

Some extenuation, perhaps for want of self-knowledge; but then we must charge a proportionate incapacity.

‘Knowledge puffeth up,’ and from Dr. Cullen’s conduct there can be no doubt that he has a great deal of knowledge. A misconception, however, of his own authority, and a forgetfulness of the situation of physician’s clerk, (for I believe he was one himself) have begotten this unbecoming and injudicious conduct.