

dual in this country, and at Paris, be true, he must be a consummate blockhead.

On the other hand, I have reason to know, that Mr. Roberts is an open, warm-hearted, inoffensive man; and, inasmuch as his conduct is forbearing to others, feels and resents an injury to himself, in a mode or measure that a cold, calculating, phlegmatic man would say was not within discreet bounds, seeing the great disparity against him of thirteen to one: still, in a foreign land, he has displayed an admirable degree of public spirit. Finally, it is melancholy to reflect, that such a host of men, calling themselves physicians, should be exhibited in so degrading a light to the French public; and, under the guise of exercising a liberal profession, pursuing a spirit of hostility and revenge against a brother practitioner, for no other reason, apparently, than that his success in practice comes into conflict with their base and monopolizing avarice.

R. I.

CASE OF STRICTURED VAGINA, FOLLOWING EXTENSIVE LACERATION DURING PARTURITION.—SUBSEQUENT PREGNANCY AND SAFE DELIVERY OF THE PATIENT.*

Dr. JAMES McNAUGHTON, the distinguished Professor of Anatomy in the University of the State of New York, relates the interesting case of an unfortunate female, who, having in a labour of extreme difficulty suffered laceration of the vagina and bladder, recovered with such a cicatrization of the parts as almost obliterated the vagina. Nevertheless, at the end of eight years she became pregnant, and went through the usual period of gestation, at the end of which Dr. McNaughton was called to attend her. On examination there was found a firm cicatrix of cartilaginous hardness, situated two inches from the orifice of the vagina. At the upper part, near the symphysis pubis, there was a small perforation leading to the uterus; beyond the cicatrix, the vagina was ascertained to be natural. After some delay the doctor divided the stricture laterally, on both sides, and introduced his finger to the os tincae, which he found dilated. As the labour progressed, and the cicatrix was rendered tense by the head of the child, which presented favourably, the orifice of the cicatrix was still further dilated by incising its margin slightly in several places. At length it became much dilated, and Dr. McNaughton flattered himself that a living child might be born.—

The pelvis, however, being preternaturally small, the head became immovably locked, and he was compelled to the use of instruments. The forceps being inadmissible, and the vectis proving ineffectual, the crotchet was the dernier resource. The calvarium having been broken up, and the brain removed, there was still great difficulty in moving the head. At length the delivery of the child was effected, but the organs of the mother were so much injured that an opening between the bladder and vagina occurred, and the urine distilling upon the lacerated parts produced great distress. To obviate this evil a catheter was introduced into the bladder, and a pledget of charpie was applied to the opening. Judicious management restored the patient to health, and healed the lacerated septum.

Professor McNaughton thinks, the stricture in this case was so complete, that in coition not a particle of the seminal fluid could have reached the uterus.

CASES IN MIDWIFERY.

By RICHARD LONG, M.D. Surgeon to the Arthurstown Dispensary.

Case in which the Body of the Fœtus was separated from the Cranium; the Head remaining in the Womb.

In April, 1826, Dr. Long was called to Mrs. F., aged thirty-four years, who was in her fourth accouchement, her former labours having been uncommonly favourable and quick. She had been in labour four days; there had been an arm presentation; the arm was removed; the thorax perforated; its contents evacuated, and, as it afterwards appeared, the crotchet had been passed through the thorax, and fixed between the first and second cervical vertebræ. In this position the unremitting exertions of the gentleman in attendance, a powerfully strong man had been used four hours to accomplish delivery without effect. On Dr. Long's visit, the uterine action continued so forcible as to preclude any attempt at turning with safety; it was also clear that delivery could not be accomplished while the body and head of the child remained in the present posture; he therefore sought for the other arm, which was removed, and immediately the remaining portion of the body was expelled with violence; but, to his great dismay, the head was separated, and remained within the uterus. Before the uterus had time to contract, Dr. Long introduced his hand, and firmly fixed the head against the side of the uterus, his colleague at the same time steadying it by external pressure; the head was then perforated, and extraction accomplished by the crotchet.

* New York Medical and Physical Journal.

In June, 1827, Dr. Long was again called to the same patient, who had been some hours before delivered, naturally, of a still-born child; the placenta was retained without hemorrhage. On examination, a firm hour-glass contraction was found in the centre of the uterus; this, however, was not the cause of the placenta being retained, as it was found firmly adherent near the fundus uteri, and required a tedious exertion with the fingers to effect its separation piece by piece. The part of the uterus to which the placenta adhered had a gristly semi-cartilaginous feel.

This woman appeared to go on well for several days after her confinement, but, from some mismanagement, peritoneal inflammation was produced, by which she was carried off.

Case of Uterine Hemorrhage.—In November, 1827, Dr. Long was requested to visit Mrs. W., aged 39 years, who had been delivered two hours before of her eighth child. She was, to all appearance, dead; there was no perceptible pulsation or breathing, except a slight convulsive heaving of the chest; the eyelids were half opened, and the eyes turned up, as in instances of recent death; the lips were colourless, the face cold and clammy, and the extremities quite cold. On examination, the uterus was found flaccid and uncontracted, and the woman drenched in blood. The placenta had been removed.

The hand was instantly passed into the body of the uterus, and, by frequent friction of its inner surface, muscular contraction was excited. The nostrils were stimulated by hartshorn, and warm wine and hartshorn were poured down the throat, apparently without any effort of deglutition by the patient. Warmth was applied to the extremities, and a large sheet, quadrupled, and wetted in the coldest spring water, was placed over the abdomen. For some hours, the success of those means, although steadily persevered in, appeared extremely doubtful. As the uterine action, however, was restored, the vital spark appeared to rekindle, and animation was slowly but perfectly established. After several weeks of suffering from extreme debility, the patient was able to resume the care of her domestic affairs.

FELINE OBSTETRICS.

There are two female cats, mother and daughter, dwelling in the laboratory of a sculptor of first-rate eminence, in the west end of town. They are by no means kindly disposed towards each other; rather the contrary, excepting on particular occasions, which are their respective periods of parturition. So soon as one exhibits parturient

inquietude, the other endeavours to cheer her by all the kind attention she can perform towards her mamma, or daughter, as the case may be; and when labour actually takes place, they both repair to a box, which serves them for a bed, and, placing their backs against the opposite sides, Madame Accoucheur places her paws against the abdomen of her patient, and continues the operation of kneading and rubbing her until a kitten is passing the *os externum*. Then she changes her mode of attention, and assists in bringing forth the young one, in a manner which instinct informs her is most calculated to alleviate the pangs of birth!—*Med. Rep.*

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TO CORRESPONDENTS.

DR. BLUNDEL'S Lectures on Midwifery will be resumed in a week or two, and will be completed in the present volume.
 Others in our next.