

After the extraction of the child the convulsions gradually subsided, but a state of profound coma supervened, which continued during a space of two days and a half. For this symptom the mildest remedies alone were had recourse to, such as were employed in the case to which I have previously alluded. I subsequently heard from Mr. King that his patient perfectly recovered.

I cannot help expressing a strong belief that if many of the cases of this description were treated less heroically and by a calmer mode of procedure, the results would be more successful.

Utility of chloroform in turning.—Several months since, I was requested to consult with Mr. — on one of the most aggravated cases of shoulder presentation I ever witnessed. During ineffective efforts to turn, he had brought both arms into the vagina, and the uterus had contracted so violently upon the child that I found it utterly impossible to introduce my hand. Had I persisted in my attempts to do so by manual force alone, I felt confident that the womb would have been ruptured. The patient was a middle-aged woman who had borne many children, and had been subject to epilepsy in her childhood. Although she was much exhausted when I was called in to see her, and various remedies had been used to overcome the spasmodic action of the uterus, this organ maintained its preternatural and vice-like contractility without a moment's intermission. Under these circumstances, I resolved to place her fully under the influence of chloroform, and it was not until she was completely overpowered by the anæsthetic effect of this agent that the spasmodic action of the womb subsided. As soon as the relaxation was complete, I introduced my hand, and easily turned the child.

In administering chloroform it must not be forgotten that its effects are often cumulative, and that some individuals are peculiarly susceptible to its influence. In the above case, the patient was a considerable period before she recovered from its effects, and, at one time, I entertained fears for her recovery. Although I highly deprecate its indiscriminate use in natural labours, I consider it of great service in the management of many cases. In employing chloroform it must not be forgotten that it paralyses the excito-motor nerves of the uterus, as well as those which supply the abdominal muscles with voluntary power. Its use is, therefore, clearly contra-indicated in cases where expulsive power is required. To lull hysterical excitement, to allay morbid pain, (by which, I mean, excessive pain as it occurs in morbidly sensitive females,) to suspend convulsions, to relax the passages, and to blunt pain during severe operations, are the principal indications for its use.

Placenta prævia.—Mrs. A—, aged thirty-four, the wife of a Polish Jew, was seized with flooding a fortnight before the full period of her fourth pregnancy. A midwife was summoned, who, after vainly attempting to stop the hæmorrhage, apprised the friends of her patient's danger, and I was called in. On my arrival, a distressing spectacle presented itself. The poor woman lay in a state of collapse, deluged with blood, and surrounded by clothes saturated with iced water. I immediately administered a large dose of brandy, and proceeded to make an examination. I found the os uteri fully dilated, and the placenta, which was extensively detached, presenting at the mouth of the womb. Having introduced my hand into the uterus, I seized the child by the feet, and extracted it without a moment's delay. To my great astonishment, the child was alive, although slightly asphyxiated; and after the usual remedies had been employed, the functions of its lungs were completely established. After the delivery, the uterus contracted, and the hæmorrhage ceased. Both mother and infant eventually did well.

This case forcibly illustrates the advantages which are to be gained by prompt treatment in placenta prævia, not only as regards the safety of the mother, but also that of the child. It is too much the practice to consider, in a dangerous or protracted labour, that the child must have ceased to exist either from the effect of pressure or other causes. This conclusion is often erroneous, and the undue reliance which has been placed on stethoscopic signs, has, I fear, in some instances, led to the hasty destruction of the fœtus, in order to save the mother a few hours' pain. When the sounds of the fœtal heart can be heard, they necessarily afford an infallible sign of the child's vitality. They are, however, sometimes inaudible. Several instances have lately come under my notice, during protracted cases of parturition, in which they could not be heard, although the labours terminated in each instance with the birth of a living child.

Gloucester-place, Portman-square, Dec. 1857.

REPORT OF A

SINGULAR CASE OF LITHOTOMY.

By WM. SHORTLIFF, M.D., M.R.C.S., &c., Malaga.

I PERFORMED the lateral operation Oct. 31st, on José B—, a healthy lad, 14 years of age, who had been suffering from symptoms of stone in the bladder for four or five years. The patient was placed in the proper position, and chloroformized, and it was remarked, on introducing the staff, that it did not touch the stone so readily as is usually the case. The necessary incisions having been made, the finger was passed through the wound, and the stone felt. It could only be reached, however, with the point of the finger, and but a small part of it touched. This was thought nothing of, the boy having a good deal of fat in the perinæum, making it consequently rather deep; and the forceps was introduced with the full confidence of quickly extracting the calculus. This, however, was found to be impossible; the stone was readily touched by the instrument, but by no efforts could I succeed in catching hold of it. Different forceps and different manipulations were used, but all without effect. By the rectum, as by the wound, the finger just reached the stone, but no more, and the forceps touched only a small surface of it, not sufficient to seize it by. The operation, with all this, had been protracted to about twenty minutes, and I considered it prudent then to desist from further efforts for the present, and leave the extraction for an after proceeding. An elastic tube was left in the wound, as is my custom in most cases.

The lad was seized the same night with severe acute bronchitis, which kept his life in imminent danger for more than a week, and put all thoughts of attempting the extraction of the stone out of the question. On the fourth day after the operation he felt something strange in the wound, and his mother, looking to see what it was, discovered the stone lying between the lips of the wound, and took it away with her fingers. It was a small, elongated, phosphatic calculus, an inch and a half in length and an inch and a quarter in circumference at the thickest part. The lad perfectly recovered, and left for his home—the village of Alora, six leagues from this place—in a month.

The difficulty in this case seemed to arise either from the stone being held by a spasmodic contraction of the muscular fibres of the upper part of the bladder, or from its being sacculated, I cannot tell which. I have performed the lateral operation twenty-five times, all but once (the seventeenth) successfully, but on no other occasion have been under the disagreeable necessity of sending the patient back to bed with the stone still in his bladder.

Malaga, 1857.

THIRD QUARTERLY METEOROLOGICAL REPORT AT ST. THOMAS'S HOSPITAL FOR 1857.

By ROBERT DUNDAS THOMSON, M.D., F.R.S.L. & E.,

PROFESSOR OF CHEMISTRY IN ST. THOMAS'S HOSPITAL COLLEGE,
EXAMINER IN CHEMISTRY AT THE UNIVERSITY OF

THE mean temperature of the quarter has been 3°·1 higher than the corresponding period of last year. The heat was not concentrated on one month, since each month was considerably warmer than the same months of 1856. The temperature of St. John's-wood during the quarter was about 2° lower than that of the neighbourhood of St. Thomas's Hospital. The effect of this augmented temperature upon health, so far as that can be reached by the mortality, does not appear to have been great, since the deaths from zymotic diseases in St. Mary-lebone, with a population estimated at 175,000, were, in the third quarter of 1856, 256, and in the corresponding quarter of this year, 277; certainly a larger number, but not in such excess as to warrant the conclusion that mortality had been much augmented by temperature. From numerous facts collected, it is highly probable, however, that sickness, particularly diarrhœa, may have been more prevalent in the present than in the previous year; but that the greater development of sanitary arrangements and of timely medical aid may have contributed to impart to the epidemic a milder character than