

after-hæmorrhage, which was stilled by injecting a solution of sesquichloride of iron. Such a degree of anæmia remained, that a second transfusion was resorted to. About three ounces of fresh blood were thrown into the right basilic vein.

The patient gradually rallied. She had æthereal spirit of chlorated iron and laudanum alternately, and warm milk. She ultimately recovered.—*Brit. & For. Med. Chir. Review.*

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### CHLOROFORM IN MIDWIFERY.

By CHARLES KIDD, M. D., of London.

It is a subject of interest from time to time to take note of the progress that certain discoveries, such as chloroform, are making in the world of practice. Some doubt has been recently expressed by Dr. Robert Lee and Dr. Barnes as to the propriety of using chloroform in special cases of midwifery. Drs. Sinclair and Johnston published 313 cases of this kind, where it was perfectly successful. Dr. Kidd has been furnished with a letter from one of the ablest obstetricians, Professor Doherty, Queen's University, Galway, in which the subject has been as clearly handled as by any of our chief authorities. Dr. Doherty has given chloroform in about 150 cases of various kinds, 130 in the County Galway Infirmary, and in about 30 puerperal case in private practice. The following is Dr. Doherty's letter, which Dr. Kidd esteems of the highest value :—

"As far as natural labour is concerned," he says, "I don't think it justifiable, under such circumstance, to add the risk, slight as it may be, which chloroform produces to the ordinary risks of labour; but there are many cases, usually termed natural, in which its administration is of great benefit to the patient—1stly, when the dilatation of the os is very painful; and, 2ndly, when the latter portion of the second stage is attended with great suffering and excessive uterine action. In the painful dilatation of the os uteri, I consider it invaluable. I don't allude to those short, muscular, thick figured women in whom we often find the neck of the uterus thick, rigid and undilatable. In such persons tartar emetic with or without V.S. is more beneficial; but when the neck is thin and dilating at probably a reasonable degree of speed, but attended with great anguish, such is the case in which chloroform acts as the greatest boon of modern science. Under these circumstances, it is by no means necessary to produce stupor; in fact, I have been astonished at the small dose which has been sufficient to render the pain bearable. The woman is never deprived of her senses, her breathing and the action of the heart are never disturbed by it, and yet she expresses the greatest comfort and most important relief. My mode of administration in these instances is by means of an ordinary Snow's inhaler; but I take the precaution of removing the valve or flap of leather which is immediately adjacent to the mouth-piece, not that over the chamber where the paper or sponge is. I am sure, then, that the patient will draw a large quantity of atmospheric air in along with the chloroform vapour. Once I perceive, by watching her for a little time, that she can imbibe it with impunity, I trust the apparatus to the patient herself, directing her to put it to her mouth the moment she feels a pain coming on, and to remove it when the pain is over. I find she very quickly gets into the habit of obeying these instructions accurately; but I keep my eye on her that she does not continue to inhale after the pain has ceased. With comparatively slight and transient effects I feel convinced I have brought many women over what would otherwise have been more painful and tedious labours from delay in the first stage with little suffering, and they have consequently been afterwards in a far more favourable condition, and their recovery has been more speedy than it otherwise, in all probability, would have been. The latter observation holds good also where the expulsive stage is attended with agonizing and powerful efforts. Chloroform allays the intense excitement, abates unnecessary force, causes the soft parts to yield, and if it does delay labour a little by suspending the voluntary actions, it does so with advantage to the patient both at the time and afterwards. In these cases, however, I find it necessary to carry its effects further than the former, and