states that this treatment does not weaken the uterine contractions, while the patient is prevented from suffering pain, and is insured calm repose after delivery.

Dr. Playfair thinks that chloral acts far better than chloroform inhalation, as chloral does not lessen the contraction, while it greatly lessens the pain. Moreover, it is chiefly applicable at a period when chloroform cannot be used; that is, toward the termination of the first stage before the complete dilatation of the os. The patient falls into a drowsy state, a sort of semi-sleep. Dr. Playfair gives fifteen grains, and repeats the dose in about twenty minutes, leaving its subsequent administration to circumstances.

Obs. 1. Fifteen grains of chloral given to a patient every four hours before confinement until seventy-five grains had been taken, Labor slow, tedious, terminated naturally. No trace on third day in milk. I believe that chloral does have an effect upon milk, though when given before labor it is eliminated before the third day.

CASTOR OIL.—The effects of castor oil in the nursing state are well known. In plethora when the secretion is deficient it is most useful; and the leaves of the plant will be found of great benefit applied as a cataplasm. I have repeatedly given castor oil to mothers, and have invariably found that it exercised a purgative action on the child; the mother's milk possessing the taste and flavor of castor oil.

CONIUM, HEMLOCK.—Most of the umbelliferæ are readily absorbed by the lacteal vessels, and may be easily found in the milk. Conium, from its sedative action and its influence on the nerves of motion, could not be expected to increase the milk supply. There are reasons, however, for its administration to mothers who are nursing, so that it is important to note how soon, if at all, it appears in the milk, and what dose produces an effect. Conium, praised by Storck for the cure of uterine scirrhus, and by Dr. Tunstall for chronic inflammation of the womb, is an excellent sedative for backache and for the sexual organs. It must be given until its physiological effects are produced, and this means a dose of the succus conii (B.P.) of two or three drams.

I administered two-dram doses of the succus conii every three hours to Helen W. until she had taken twelve drams.

DIGITALIS PURPUREA, PURPLE FOXGLOVE.—As a rule digitalis lowers vascular activity and blood-pressure, although there are occasions when it has an opposite effect. It is well called a cardiac tonic, as it regulates the heart beats, producing rhythmic contractions in place of disordered and irregular action. As the latter state may exist during lactation, its administration may sometimes be deemed advisable. In three cases I administered infusion of digitalis in half-ounce doses every six hours, but could not detect any evidence of it in the milk. This is doubtless owing to its being so speedily eliminated by the kidneys.

ERGOTIN.—The effect of ergotin on fœtal life is well known. Its influence on the milk has not been noted. I gave twelve grains to a private patient one month after confinement, owing to a slight attack of hemorrhage, in doses of two grains every three hours; the effect was satisfactory. The mother told me that she believed the pills, though small, had affected her milk, as her child was cross and seemed to suffer from pain, and would not take the breast. She said she would not take any more medicine. She allowed me to draw off some of her milk, which was submitted to the test but none was found.

IODIDE OF POTASSIUM.—Simon states that he could not detect this in milk, and Meymott Tidy (London Hospital Reports, 1867) admits a similar failure: Herberger found it. My own observations accord with those of the latter, and I employed it for two reasons: First, to see whether it did enter into the milk, and, secondly, to observe its action as an anti-lactescent, for which purpose Dr. F. H. Morris, Cheltenham, recommends it. He says (*Lancet*, vol. ii, 1874), "that in three-grain doses every three hours it is better than belladonna."

Emma Cooper. History given in previous section. I gave her fifteen grains of iodide of potassium every three hours. After she had taken sixty grains I drew off six centimeters of milk, and tested it. No alteration as regards quantity of secretion. I continued the iodide for some days in smaller doses (five grains), but still there was no decrease in quantity of secretion. So that my observations do not confirm those of Dr. F. H. Morris, but I believe its prolonged use deteriorates the milk by impoverishing the blood.

I drew off twenty centimeters of this woman's milk on the third day of her taking the iodide, and gave it to a child aged eighteen months. The child's urine was collected and examined: slight traces of the drug found.

MERCURY.—An Irish student was once asked how he would salivate a child three months old, and he replied that he would give mercury to a she-goat and allow the child to drink the milk.

Mercury undoubtedly finds its way into the blood, and, as Headland says (Actions of Medicine), by some inscrutable chemical power, of whose nature we know nothing, it is able to decompose the blood; by some destructive agency it deprives it of one-third of its fibrin, one-seventh of its albumen, one-sixth or more of its globules, and at the same time loads it with fetid matter, the product of decomposition. Mercury has been found in milk. (Gallier, *Toxicologie Générale*, 1855.)

Obs. 1.—Mary W., private patient, aged twenty-five, gave five grains of blue pill at bedtime, followed by a purgative draught in the morning. Aperient action produced. No effect on milk. No trace of drug could be found in it.

Obs. 2.—Rebecca G., syphilitic private patient, gave gray powder in doses of one grain every six hours for three days; slight purgative effect pro-