## ORIGINAL COMMUNICATIONS.

*Surgical and Other Cases occurring in Newfoundland.* Reported by WILLIAM ANDERSON, M.D., and C.M., Glasgow.

On March 2, 1869, I was called to see a primipara, aged 24, who had been in labour for twelve or fourteen hours. My first question was, "How long since the last pain?" This, neither the patient herself, who was quite sensible and apparently quite easy, nor any one about could answer, which, as a vaginal examination revealed a head well down in the pelvic cavity and an os uteri well dilated, was to me rather perplexing. On uncovering the abdomen I found two prominences, one hypogastric, the other occupying the left lateral and umbilical regions, and separated from that first mentioned by a depression passing obliquely across the abdomen, from the right hypochondrium towards the left crista ilia. I could not be certain as to the state of matters; repeated questioning as to pains, only eliciting repeated protestations of ignorance as to anything of the kind having occurred. I could make out nothing with the stethoscope that I could trust to, and under these circumstances resolved to unravel the case by delivering with forceps. The fœtus, almost inanimate, was followed by a gush of blood fluid and clotted. Giving the newly born a hasty roll on the floor and a dash with water, I introduced my hand as far as the fundus of the uterus and found the secondary prominence, formed of clots and placenta (detached); the uterus to some extent contracted on the mass; ergot was at the same time given, kneading and cold combining with it, to procure a fair degree of uterine contraction; the cold applications were somewhat heroically carried out, a fair-sized snow-ball being lodged in the uterus; after contraction took place the aorta was compressed with the thumbs, while a long bandage was being prepared, to be placed as a spica, taking its origin round both thighs and transversely over a large graduated pad placed in front of the aorta, and as far as