

most certain and powerful sedatives which we possess, and presents strong claims to our consideration, under the peculiar circumstances of the case. To be of any real value, however, it requires to be vigorously practised, and relaxation will be found rarely to follow, until a large quantity of blood has been abstracted, and syncope is on the point of supervention. There can be no question that the best effects follow its employment, as far at least as rigidity is concerned. But is this line of practice always expedient? Is it always imperiously demanded? When the os uteri exhibits heat, dryness and tenderness, such effects being the evidence of existing inflammation, the propriety of the practice cannot be questioned. But before the development of these symptoms, several hours may elapse, during which the effects of irritation alone are apparent as indicated by the mere rigidity. Under these circumstances, bleeding is *not* imperiously demanded, chiefly because it entails an unnecessary withdrawal of blood, inductive of debility, and protracted recovery—thus effecting more than we desire. The practice, however, is recommended and sanctioned by Burns, Dewees, Blundell, Ramsbotham, Chailly, Cazeaux, and a host of others.

2. The exhibition of opium is not always attended with the advantages which we might *a priori* be led to expect from its well known narcotic powers. If exhibited, full doses should be employed: but as in the case of bleeding, it is liable to effect too much—it may lull the uterine contractions, and thus suspend the labour, which it is generally desirable to expedite.

3. The local application of Belladonna. This was first proposed by Chaussier, who suggested its use in the form

of ointment made with cerate, reasoning analogically from the influence of this medicine upon the iris. Dubois subsequently used the extract in its undiluted state. The practice is peculiarly French, and has not been followed to any extent by either British or American accoucheurs. That the application of the belladonna will produce relaxation is admitted on all hands; but the extent of that relaxation cannot be predetermined. It may affect the whole muscular coat of the uterus, and be thus productive of alarming consequences.

4. Tartar Emetic. The prostration and muscular relaxation produced by this agent, almost naturally indicate its employment in cases of the kind we are considering. Nausea having been once established, the rigidity will in a very large majority of cases be found readily to yield. Tartar emetic seems almost to exert a special influence on the cervix, for while the contractions of the fundus and body of the uterus are not interfered with, dilatation of the cervix will be found to proceed rapidly, and this the result of the re-establishment of the reflex actions existing between the stomach and the uterus, which are apparently suspended.

The few authors who have advocated the employment of tartar emetic in these cases, have generally prescribed it in doses of one fourth of a grain repeated every three or four hours, until its influence became apparent by the gradual dilatation of the mouth of the uterus. There is certainly no worse system of midwifery than the meddling midwifery; but if, in any case, interference is demanded, whether of a manual or medicinal nature, the object should be a speedy delivery, consistent with the safety of the mother and the child. My own observation has led me to the belief that it may be safely resorted to in much