

more than one hundred years ago, and many devices were tried to overcome the difficulty with a certain amount of success.

Tarnier solved the problem in 1877 by attaching one traction rod to each blade of the forceps, and fastening both rods to a handle or crossbar. His original instrument was rather clumsy, and he made many improvements in it before his death. Various slight modifications have been made in different parts of the world. As a rule all that are constructed on the Tarnier axis traction principle are good. But no such modification as the attachment of tapes by loops passed through the fenestræ by the blades, or the perineal curve of Galabin, is satisfactory. I fear that even Neville's forceps, so highly lauded by the Rotunda men, is not a true axis tractor.

I used the Milne Murray modification of Tarnier with much satisfaction for about ten years, but when in Paris two years ago I got the latest Tarnier forceps as recommended by Pinard. After using this excellent instrument for a time, and after a trial of Porter Mathews axis traction forceps, I have chosen the latter as the one which seems best suited for my own work.

Without any extended discussion I shall mention briefly some of the advantages of the axis traction forceps, quoting largely from Milne Murray:

The great advantage of its use at the brim is generally understood and admitted. In many cases the axis traction instrument will accomplish what the ordinary long forceps cannot do.

"For once they have proved their efficacy at the brim they have done so ten times in the cavity and twenty times at the outlet."

The blades grasp the head securely without producing dangerous compression.

Extraction is accomplished with comparative ease and without any waste of force.

To be sure of doing this you have only to preserve the proper relationship between the traction rods and the shanks.

By keeping the instrument on the head until delivery there will generally be less injury to the pelvic floor and perineum.

At no stage will the instrument prevent flexion and rotation of the child's head.

Method of application of the Porter Mathew's forceps.

The traction block and handle are laid aside at first, but the blades are applied with the traction rods in place. The patient is in the dorsal position.

Take the left blade in the left hand, the thumb in the angle of the traction rod, and the fingers encircling the traction rod