

It will suffice to say that I have used chloroform or ether in hospital or private practice but once or twice since I commenced using the bromide of ethyl, and the conclusions at which I have arrived after a short, yet I believe a sufficient, trial are:

1st. That bromide of ethyl, or, as it is indifferently called, hydro-bromic ether, is an anæsthetic of great value.

2nd. That being less pungent than ether, and less irritating than chloroform, it can be administered with greater facility than either.

3rd. That it is far more rapid in its action than ether, and even more rapid than chloroform.

4th. That the pulse and breathing are less influenced than with ether or chloroform.

5th. That there is less resistance and struggling on the part of the patient.

6th. That judging by limited experience, vomiting is less frequent than after chloroform or ether.

7th. That in no case was there disposition to fainting.

8th. That it is eliminated from the body much more rapidly than any anæsthetic except laughing gas.

If the above propositions are fairly stated, it follows as an obvious corollary that bromide of ethyl is one of the, and in some respects the most valuable anæsthetic hitherto used.

I confine my observations, advisedly, to the use of bromide of ethyl in surgery. What aid the accoucheur may obtain from it remains, in great measure, to be seen. Dr. Turnbull claims that, when used in tablespoonful doses, when the pains are most intense and distressing, it gives as prompt relief as ether, and yet it did not interfere in the least with the expulsive efforts. The quantity given appears large, and would indicate that it had been administered as chloroform usually is in obstetric cases, largely diluted with air; whereas, in all my surgical cases I have endeavoured, save in old persons, to have the air excluded as much as possible.—*Canada Medical Record.*

**DRESSING FOR BURNS.**—Iodoform, ʒi; spermaceti, ʒi; extract of conium, ʒij; carbolic acid, gtt. x. Spread on some soft material and cover the burnt parts.

## Midwifery.

### ON THE USE OF INTRA-UTERINE STEM-PESSARIES.

BY ALBERT H. SMITH, M.D.

So much has been said for and against the use of intra-uterine stem-pessaries, and especially have such violent and sweeping condemnations been uttered recently against them, that it becomes impossible, except through careful observation and the results of clinical experience, to arrive at a just estimate of their value, and to assign them their proper place in the list of surgical appliances. While some recent authorities, as Barnes, Goodell, Tilt, Hewitt, Schroeder, and Winckel, accept them without question as therapeutic agents, to be used, of course, discreetly and judiciously,—as may be said of all therapeutic measures,—yet it must be admitted that the great proportion of gynecologists stand with those (as Thomas and Courty, of Montpellier, and De Sinety) who teach that they are instruments whose capabilities for harm far outweigh their possible usefulness, and some even in the more extreme position of unqualified condemnation, with Nonat and Emmet. When we find it stated by the last-named eminent author—excelled by none as an accurate, honest, and conscientious observer of his cases—that “experience will at last teach every one that no permanent benefit is ever derived from its use, that no degree of tolerance is ever established, but that sooner or later, in almost every case, mischief will result,” it can be considered only as an unpromising work to attempt to convince the mass of the profession that there can be any virtue in the intra-uterine stem. And yet I have had such excellent results from its use, and have come to look upon it as such a necessary therapeutic means in the management of certain kinds of cases, that, at the suggestion of a valued friend among us, I have determined to make it the subject of a paper, in which I can bring forward my own views and observations,—not authoritatively at all, but mainly to elicit discussion from others who have had experience perhaps far greater than my own.

The intra-uterine stem appears first to have