

doctor was called in, a midwife having been in attendance until that day! The following is his own account of the case: "When I arrived I found that uterine inertia had taken place, the os was fully dilated, but the head was retained at the brim. Before I saw her, she had frequent calls to micturate, which made passing the catheter unnecessary. I applied the forceps and delivered with difficulty, requiring a great amount of traction. The perineum was badly ruptured. I wanted to suture, but the patient and those about her objected on the plea that she had suffered enough already. There was marked incontinence of urine during convalescence, but this improved materially as she grew stronger, though up to the time when I last saw her she complained of it, and found it to greatly interfere with her work." (He then goes on to apologise for his scanty notes of the case, as she was not a regular patient of his.) The improvement continued until she could retain her urine for three hours during the day, but during the night she had to pass it every few minutes. In two months this improvement ceased, and she got steadily worse up to the date of her admission. The urine has always been very hot, irritating and thick, with a deposit on standing.

*State on admission.*—The patient makes water every few minutes, during both night and day, but especially often at night. The urine is alkaline in reaction, thick, and deposits pus and phosphates on standing. On making a local examination, the perineum was found to be torn to within half an inch of the anus. The cervix and uterus were normal. The sound only passed four inches into the bladder, and the meatus urinarius was very tender.

*Treatment.*—This consisted in washing out the bladder once a day with a warm solution of carbolic acid (1-60), together with internal medication, giving belladonna, hyoscyamus, buchu, and half an ounce of a saturated solution of boracic acid three times a day.

On June 12th an attempt was made to repair the perineum by Tait's method, so the local treatment of the cystitis had to be discontinued. As incontinence of urine came on the day after