It acts like an opiate in getting rid of irregular and useless pains and allowing better ones to come on in their stead. In other cases, where pains are going on well and the female is adding them greatly by expulsive efforts, chloroform, especially if given freely, will not only to a large extent do away with the voluntary force exerted by the abdominal musi-cs, but will also diminish the frequency and force of the contractions of the involuntary musicular fibres of the uteruitself.

As soon as the head of the child is born, of course the chloroform should be removed; and I would say even a little before this, so as to allow the uterus to regain more completely its power to contract upon and expel the placenta after complete delivery of the child, for I can't help thinking that we are more apt to get post partiam temornhage after the use of chlorotorn than where we do without it. After chloroform I am therefore particularly careful to follow down the uterus as it explict the child, and keep it contracted by pressure and occasional friction through the abdominal walls.

GLEANINGS FROM MY NOTE BOOK.

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The following cases are not reported because they contain anything uncommon, or because I think that they reflect any credit on me as a surgeon; but simply as additions to the number of cases slightly removed from every-day occurrences, and as records of my own field of observation, I give them to the world:

CASE 1.—REMOVAL OF A PEBBLE FROM THE EAR, AFTER HAVING REMAINED THERE THREE YEARS.

Miss J., et 12, was brought to my surgery on the 19th of August last, to have a little stone removed from her ear, which her grandmother, who came with her, stated had been there for three years. The stone could not be seen distinctly, but on passing a probe into the ear it immediately impinged upon it. The child was so timid that I had to administer inloroform to procure an examination.

This was made by means of a speculum, and the stone was discovered completely blocking up the meatus externus at about