

We have thus minutely described the preparation of the patient, as we positively believe that her excellent recovery depended in a great measure on the antiseptic precautions used.

As soon as my assistant had got the patient under the influence of the chloroform, I lubricated the back of my right hand with boric acid ointment, and proceeded to pass it into the vagina. After this I began dilating the os and cervix, which we found tolerably dilatable, using first one finger, then two, next three, and lastly the whole hand. Passed the hand up the right side, where the placenta was partially detached, until I reached the bag of waters, and by pressing down the uterus with the left hand, was able to rupture them. Could distinctly touch the head of the child, and by internal and external manipulations was able to turn, by what is known as the bipolar method, and get hold of a foot, which I brought well down, and all hæmorrhage ceased.

I describe this the more particularly, as most authors omit any description of the operation, and others who describe it never performed it themselves, and either speak too lightly of it or surround it with unnecessary warnings, which are apt to frighten rather than aid the inexperienced operator.

Pains now came on at regular intervals and we used traction during each pain. We had some difficulty in getting the arms down as they were extended over the head of the child. We succeeded, and the head engaged in the superior strait. The real difficulty now began; I found that with all my art and as much force as was justifiable, I could not deliver the head. Upon particular examination, I made up my mind that we had a hydrocephalic head to deal with, which diagnosis was afterwards proved to be correct. We now had recourse to the forceps, which were in readiness for such an emergency.

I managed to employ them without much difficulty, and directing the doctor to press firmly on the uterus, made traction during the pains and soon had the head in the world. The placenta followed shortly afterwards, its expulsion being aided by Crede's method. No ergot was given owing to the nausea occasioned by the chloroform.

The whole operation as described only occupied about thirty-five minutes.

After allowing the patient to rest for a few minutes, the clothing was carefully changed and the external parts and limbs sponged carefully with the antiseptic solution. The bandage and compress over the uterus were then applied and over the vulva was placed an antiseptic pad. Severe afterpains, which followed, were relieved by hypodermic injections of morphia.

The after treatment consisted in syringing the vagina night and morning with hot carbolie acid lotion and in giving a mixture of magnes-sulph, which produced on an average three loose motions daily, and most effectually prevented any trouble from the secretion of milk. The temperature never rose even one degree. She made an uninterrupted recovery.

REMARKS.

There is no complication in pregnancy more trying to the physician than Placenta Prævia, and by trusting to the old method of plugging and waiting, the case drags slowly along, a constant source of danger to the patient and anxiety to her friends and attendants.

By the new method, viz., the induction of premature labour under antiseptic precautions, and the disuse of the tampon as a means of controlling hæmorrhage, we