thumb turned inwards,—spasmodic twitches about the face, which sometimes progress to actual convulsions. In these cases it generally has happened that the head of the infant has been submitted to long and continuous pressure while passing the bones of the pelvis. The tumid scalp and livid face of the still-born child plainly indicate the extreme congestion to which the vessels of the head have been submitted. The change of circulation and the establishment of the new functions of respiration—should any impediment occur to its development—may cause the blood to flow with difficulty in the new and unaccustomed channels, and under these circumstances death will not unfrequently occur during such transition.

We need hardly say that the indication to be fulfilled in these cases is to unload the vessels of the brain ; by dividing the umbelical cord we may allow the flow of blood to occur to the amount of half an ounce or more, and when we find that the colour of the child's countenance changes, we shall be convinced that the end has been attained.-The employment of a warm bath, so as to determine the blood to the body and extremities, while we apply cold water to the head; but if these means do not quickly relieve the oppressed brain, and respiration fails to be established rotwithstanding the flow of blood, we may rationally condude that the condition of insensibility is dependent upon the rupture of a blood vessel and internal hormorrhage. Still, however, we should not hesitate to attempt artificial respiration, hoping that the causes which impeded the stablishment of the new function may be but of a tempomy character, and possible to be overcome by perseverance 4 such means.

The subpericraneal variety, which our correspondent has solearnedly illustrated, generally occurs in the form of a "mour, which will not be observed until some day or two ther birth, at which time it generally attains its greatest volume. We may now generally find a sense of fluctuation 4 it, although it 13 very tense and elastic. The coverings due tumour present their natural colour in consequence dhaving its seat below the tendon of the occipito-fontalis.