

fitted a gum-elastic catheter, moulded to direction of a uterine sound. No result followed, the placental sound not diminished, and swelling of same size. Patient was all the while losing ground, so I asked Dr. Fraser to see her with me. We tried galvanism and kneading in addition to the previous treatment, and this failing; Dr. Fraser recommended forcible dilatation of the os uteri, and the extraction of the uterine contents. This was done on the night of May 5th, and I succeeded in partially detaching the placenta, and in removing small fragments of it by a pair of throat forceps which fitted the direction of the uterine cavity very well. The vagina was again well crammed with the marine lint, and the ergot and borax mixture ordered to be continued at frequent intervals during the night. Next morning I found the patient in a highly alarming condition: the pulse 127, the features shrivelled, the breath having the sickly scarlatinal odour of peritonitis; the abdomen tender and distended; death appeared impending. The patient was greatly distressed by retching, so, fearing bad local effects from use of syringe, I gave several doses, of what amount I forget, of acetate of morphia solution, at half-hour intervals, till relief was afforded, and went home to take rest, expecting soon to learn that all was over. About half-past one on May 6th I received a message stating that not long after I had left labor pains ensued, and had resulted in expulsion of a large quantity of clots. I went and found a vessel containing a quantity of very foetid material, like decayed blood clots, and two separate masses, like placenta, without membranes or remains of funis, not unlike a fresh clot of blood subjected to a stream of water. Patient seemed better. Hypophosphite of Soda was then given, and continued for some days with apparent constitutional benefit, and the ergot also for fear of hæmorrhage. The injections were continued twice daily until the returning water ceased to be tinged or bring away fragments of clot; the uterus slowly regained its normal size. The patient had a few ups and downs, but under good kitchen discipline ultimately made a very complete recovery. I mention the facts as they occurred; and will conclude by remarking that I think the morphia had time to exert the action it is supposed to have in instituting uterine action.

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On May 5, a man aged 35 presented himself in a very distressed condition. He had had nasal polypus for nine years. The right nasal cavity was greatly expanded, and the hardened end of a very large polypus protruded beyond the edge of the nostril. This hardened condition was apparently owing to a rub with caustic administered by a medical man last year. I seized the mass with