after a while had the satisfaction of finding the placenta thrown off. The cause of danger and perplexity then became evident, for I removed from five to seven pounds of old black coagula. The uterine surface of the placentra showed that it had been detached over its larger part. The woman slowly recovered to a great extent, but was ever afterwards an invalid and remarkable for her extreme pallor.

Case II occurred on December 4th, 1860, to one of those unhappy individuals whose bairntime (to use a Scotticism) was a catalogue of disasters. She had arrived at the eighth month of her eleventh pregnancy, when she was, at 4 a.m. of the morning mentioned, while lying quietly in bed, seized with sudden deadly syncope. As she lived close to my house, I saw her in a few minutes, and, recognising the nature of the case, I examined and found the head presenting and the funis prolapsed. Being thus able to assure myself that the child was dead, and knowing from former experience that to deliver the patient with forceps was a work of time and difficulty, I did not hesitate to resort immediately to craniotomy, and, after giving ergot, to remove the placenta and a large mass of coagulum which appeared to be of recent formation. The patient recovered, and had children subsequently.

Case III.—This patient is the wife of an innkeeper living four miles from my house, and was expecting her seventh confinement in November last. For four days she had been observed to lose her colour, and complained of hardness and tension of the abdomen, but had continued to move about and attend to her household duties. On the afternoon of the 19th she fell suddenly in her kitchen, and was for a long time unconscious. When she was carried to bed, a slight discharge of blood was observed, and I was sent for, being told to come directly, as she had had a fit. When I arrived she had become conscious, but was tossing about faint and pulseless, with no labour-pains, but a slight sanguineous discharge from the vagina. On examination, I found the os about the size of a shilling, occupied by distended membranes, but very hard and resisting. I immediately sent to my son, Dr. Parsons, asking him to bring various instruments, and intending, as the urgency of the case seemed increasing every moment, to deliver as soon as he arrived. As, however, by reason of distance, a considerable time must necessarily elapse. I determined to do something; and so I ruptured the membranes, and gave at once two drachms of the liquid extract of ergot, repeating the dose in half an hour. Fortunately these means were successful in controlling the hemorrhage; and on my son's arrival the aspect of affairs had so much improved that we considered it right to wait a while and