

sant ammoniacal odour of urine diffused through the bedding as also through the patient's clothes; from my previous acquaintance with the lady and her well known habits of cleanliness, I was at once satisfied that there must be some unusual cause for the present state of things. The examination satisfied me that the case had been seriously tampered with, that in more than all probability the child's life had been forfeited, and that from the state of the parts and the impaction of the child's head, nothing could be done but to complete the delivery instrumentally. Had I been called at an earlier period of the parturient process, the proper and only course would have been to turn the child, but under the present circumstances it would have been folly to have entertained such an idea; the tip of the finger could no where be passed between the head and the brim of the pelvis, and although the uterus was in a perfectly quiescent state, all the power I could exert did not impart to the head the slightest upward movement as is most generally the case—to a variable degree, it is true—when the head is in a favorable position, and it has not been allowed to remain too long wedged in the pelvic outlet.

The next plan which presented itself was the use of the forceps, and here again the following objections forcibly presented themselves:—it was impossible to introduce the blades of the instrument it being of the short description—sufficiently high to attain a good and reliable purchase upon the head; secondly, it imparted the feeling of thorough ossification, and from the absence of the fontanelles, and but a very faint trace of one of the sutures, the sagittal, passing from left to right, and the feeling of the ear, the stereotype guide of many writers and practitioners, being entirely out of the question, I was left with no reliable "landmarks" to fix with any degree of certainty the presentation; however, to satisfy all parties, I endeavoured at two different trials to apply the instrument, when having failed as I had told the friends such would be the case, nothing now remained to be done but to perforate the head, lessen its volume, and extract the child with the hook. The left hand having been introduced in the vagina so that the index and middle fingers rested on the head, about the centre of the pelvic brim, Smellie's scissors were now passed along the hand and groove formed by the two fingers, and the boring operation commenced; if the Doctor had encountered a hard job in rupturing the *second* bag of waters, I had now more than I had bargained for in making a hole through the cranial bones—it was sometime even before I could make any impression on them, and it led me almost to suppose that I was trephining a dry skull with a most wretchedly dull instrument. Finally, an opening was effected, the handles of the instrument were now confided to one of the doctors, and while my left hand maintained its original position as guard to the maternal soft parts, he worked away one hand on each handle, alternately closing and opening them, then with a rotatory motion till the instrument had fairly penetrated the cranial cavity. I had now unquestionably discovered the cause of the past and present trouble, the extraordinary degree of ossification of the bones, and knowing that one opening only would not answer, and not being provided with a cephalotribe or some other instrument of the kind to crush the osseous structures, two more openings were made and the intervening portions of bone broken down and removed with the blunthook. This part of the operation necessarily occupied a little time, and re-